## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L05000066297

1. Entity Name KETACO, LLC



Principal Place of Business

580 LAW STREET MELBOURNE, FL 32935 Mailing Address

P.O. BOX 360892 MELBOURNE, FL 32936

## FILED Apr 21, 2008 08:00 A Secretary of State



03132008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-3106811 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BIRO, ANDREW K 580 LAW STREET MELBOURNE, FL 32935 DO NOT WRITE
IN THIS SPACE

<ol><li>The above named entity submits this statement for the purpose of changing its regist</li></ol>	ered office or registered	agent, or both, in the State of Florida.	I am familiar with, and accept
the obligations of registered agent.			
	•	•	

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BIRO, ANDREW K P.O. BOX 360892 MELBOURNE, FL 32936
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BIRO, M. KETA P.O. BOX 360892 MELBOURNE, FL 32936
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BIRO, M. KETA P.O. BOX 360892 MELBOURNE, FL 32936
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BIRO, ANDREW K P.O. BOX 360892 MELBOURNE, FL 32936
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver cytrustee employered to execute this report as required by Chapter 608. Florida Statutes.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/10/08

271-7171

Daytime Phone #