2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000108335

Entity Name: NKG HOLDINGS, LLC

4005 RIVULET

LOUISVILLE, KY 40299

Address:

City-St-Zip:

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: MITCHELL L. WALKER 517 HILLCREST DRIVE DAVENPORT, FL 33897 **New Mailing Address: Current Mailing Address:** MITCHELL WALKER 209-25 111ROAD QUEENS VILLAGE, NY 11429 FEI Number: 20-3810220 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WALKER, MITCHELL L 517 HILLCREST DRIVE DAVENPORT, FL 33897 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete WALKER, MITCHELL L Name: Name: 136-36 244 STREET Address: Address: City-St-Zip: ROSEDALE, NY 11422 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: WALTERS, PHILL Name: Address: 1240 BEDFORD AVENUE, APT, 1H Address: City-St-Zip: BROOKLYN, NY 11216 City-St-Zip: Title: MGR () Delete Title: () Change () Addition COLLINS, MARICAL Name: Name: Address: 120-15 227 STREET Address: City-St-Zip: CAMBRIA HEIGHTS, NY 11411 City-St-Zip: () Delete Title: MGR Title: () Change () Addition THOMAS, ED Name: Name: 1542 VICTORIA STREET Address: Address: City-St-Zip: BALDWIN, NY 11510 City-St-Zip: Title: Title: MGR () Delete () Change () Addition WITHERS, MARCUS Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Address:

City-St-Zip:

SIGNATURE: PHILL WALTERS MGR 03/24/2009