2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000122023

Entity Name: KALAMATA SKALA HOLDINGS, LLC

FILED Apr 26, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4898 TROPICANA AVENUE COOPER CITY, FL 33330 4898 TROPICANA AVENUE COOPER CITY, FL 33330 US

Current Mailing Address: New Mailing Address:

4898 TROPICANA AVENUE COOPER CITY, FL 33330 US COOPER CITY, FL 33330 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BUSINESS FILINGS INCORPORATED 1203 GOVERNOR'S SQUARE BLVD SUITE 101 TALLAHASSEE, FL 323012960 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:

MGRM Title: () Delete (X) Change () Addition ANGELAKOS, MICHAEL ANGELAKOS, MICHAEL Name: Name: 4898 TROPICANA AVENUE Address: 4898 TROPICANA AVENUE Address: City-St-Zip: COOPER CITY, FL 33330 City-St-Zip: COOPER CITY, FL 33330 Title: MGRM () Delete Title: (X) Change () Addition

Name:ANGELAKOS, ELENIName:ANGELAKOS, MICHAELAddress:4898 TROPICANA AVENUEAddress:4898 TROPICANA AVENUECity-St-Zip:COOPER CITY, FL 33330City-St-Zip:COOPER CITY, FL 33330

Title: MGRM () Delete Title: (X) Change () Addition KOMINAKOS, DIMITRIOS ANGELAKOS, ELENI Name: Name: 4898 TROPICANA AVENUE Address: 416 99TH STREET Address: City-St-Zip: BROOKLYN, NY 11209 City-St-Zip: COOPER CITY, FL 33330

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Title: () Delete Title: S () Change (X) Addition

 Name:
 Name:
 KOMINAKOS, DIMITRIOS

 Address:
 Address:
 416 99TH STREET

 City-St-Zip:
 City-St-Zip:
 BROOKLYN, NY 11209

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 KOMINAKOS, DIMITRIOS

 Address:
 Address:
 416 99TH STREET

 City-St-Zip:
 City-St-Zip:
 BROOKLYN, NY 11209

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: MICHAEL N ANGELAKOS MGRM 04/26/2006