# 2008 LIMITED LIABILITY COMPANY
## ANNUAL REPORT

DOCUMENT # L06000014197

**1.** Entity Name
K.I.S.S. MANAGEMENT, LLC.

| Principal Place of Business | Mailing Address |
|---|---|
| 5410 NORTH BAY ROAD<br>MIAMI BEACH, FL  33140 | 5410 NORTH BAY ROAD<br>MIAMI BEACH, FL  33140 |

## DO NOT WRITE IN THIS SPACE

03272008 No Chg-LLC          CR2E083 (12/07)

| **4.** FEI Number | Applied For |
|---|---|
| 20-4276860 | Not Applicable |

**5.** Certificate of Status Desired  ☐  **$5.00** Additional Fee Required

**6. Name and Address of Current Registered Agent**

FERRARI-TOBIN, CHRISTINE M
5410 NORTH BAY ROAD
MIAMI BEACH, FL  33140

## DO NOT WRITE
## IN THIS SPACE

**8.** 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. 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 re-instating)

04/29/08-80081-001  138.75

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

**9.** MANAGING MEMBERS/MANAGERS

| | |
|---|---|
| TITLE | MGRM |
| NAME | FERRARI-TOBIN, CHRISTINE M |
| STREET ADDRESS | 5410 NORTH BAY ROAD |
| CITY-ST-ZIP | MIAMI BEACH, FL  33140 |
| TITLE | |
| NAME | |
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| 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 or trustee empowered 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          Date          Daytime Phone #