

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000044357

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** KEOPS LLC

**Current Principal Place of Business:**

2210 NW 92ND AVE  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

2210 NW 92ND AVE  
MIAMI, FL 33172

**New Mailing Address:**

**FEI Number:** 20-4824722

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FADEL, SALOMON  
2210 NW 92ND AVE  
DORAL, FL 33172 US

**Name and Address of New Registered Agent:**

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:**

**Title:** MGR  
**Name:** FADEL, SALOMON  
**Address:** 2210 NW 92ND AVE  
**City-St-Zip:** DORAL, FL 33172

**Title:** MGR  
**Name:** FADEL, ELIAS  
**Address:** 2210 NW 92ND AVE  
**City-St-Zip:** DORAL, FL 33172

**Title:** MGR  
**Name:** FADEL, FUAD  
**Address:** 2210 NW 92ND AVE  
**City-St-Zip:** DORAL, FL 33172

**Title:** MGR  
**Name:** FADEL, RAUL  
**Address:** 2210 NW 92ND AVE  
**City-St-Zip:** DORAL, FL 33172

I hereby 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:** SALOMON FADEL

MGR

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date