

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000096375

FILED
Jan 17, 2007
Secretary of State

Entity Name: KARIN'S KAKES LLC

Current Principal Place of Business:

5231 LAUREL OAK COURT
NORTH PORT, FL 34287 US

New Principal Place of Business:

Current Mailing Address:

5231 LAUREL OAK COURT
NORTH PORT, FL 34287 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHMIDT, KARIN H
5231 LAUREL OAK COURT
NORTH PORT, FL 34287 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: RA () Change (X) Addition
Name: SCHMIDT, KARIN H
Address: 5231 LAUREL OAK COURT
City-St-Zip: NORTH PORT, FL 34287

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: KARIN H. SCHMIDT

RA

01/17/2007

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