

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000122175

**FILED**  
**Feb 25, 2007**  
**Secretary of State**

**Entity Name:** S K MANAGEMENT CONSULTANTS, LLC

**Current Principal Place of Business:**

10530 MARTINIQUE ISLE AVE  
TAMPA, FL 336472774

**New Principal Place of Business:**

**Current Mailing Address:**

10530 MARTINIQUE ISLE AVE  
TAMPA, FL 336472774

**New Mailing Address:**

**FEI Number:** 20-8509285

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

KHATOR, SURESH K  
10530 MARTINIQUE ISLE AVE  
TAMPA, FL 336472774 US

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

KHATOR, SURESH K DR  
10530 MARTINIQUE ISLE AVE  
TAMPA, FL 336472774 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:** SURESH K KHATOR

02/25/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:**

**ADDITIONS/CHANGES:**

**Title:** MGR ( ) Change (X) Addition  
**Name:** KHATOR, SURESH K DR  
**Address:** 10530 MARTINIQUE ISLE AVE  
**City-St-Zip:** TAMPA, FL 336472774

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:** SURESH K KHATOR

MGR

02/25/2007

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