2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

Jan 30, 2008 8:00 am **Secretary of State** DOCUMENT # L07000034023 01-30-2008 90091 031 ***138.75 KGT INVESTMENTS, LLC Principal Place of Business Mailing Address 7307 NW 56 ST 7307 NW 56 ST MIAMI, FL 33166 MIAMI, FL 33166 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01252008 Chg-LLC CR2E083 (12/06) City & State City & State 4. FEI Number Applied For 580 20-8 Not Applicable Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BALWANT CHEEMA, P.A. Street Address (P.O. Box Number is Not Acceptable) 4160 WEST 16TH AVENUE SUITE 309 HIALEAH, FL 33012 City Zip Code 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 reinstating) DATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES MGRM TITLE ☐ Delete TITLE ☐ Change Addition ARREGUI, RICARDO J NAME NAME 7307 NW 56 ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33166 CITY-ST-ZIP MGRM ☐ Delete TITLE ☐ Change ■ Addition NUNEZ, RAUL E NAME NAME STREET ADDRESS 7307 NW 56 ST STREET ADORESS CITY-ST-ZIP MIAMI, FL 33166 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE TITLE ☐ Change ■ Addition STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-2(P CITY - ST - ZIP 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 received or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. RECARDO J. AMREGUE, MORM

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