

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000046026

FILED  
Jul 09, 2008  
Secretary of State

Entity Name: ZALKA 6 ENTERPRISES LLC

**Current Principal Place of Business:**

6437 NW 99TH AVE  
PARKLAND, FL 33076

**New Principal Place of Business:**

**Current Mailing Address:**

6437 NW 99TH AVE  
PARKLAND, FL 33076

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

STEPHEN M ZALKA CPA  
6437 NW 99TH AVE  
PARKLAND, FL 33076 US

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

STEPHEN M ZALKA CPA  
6437 NW 99TH AVE  
PARKLAND, FL 33076 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: STEPHEN M ZALKA

07/09/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ZALKA, BRENDA  
Address: 6437 NW 99TH AVE  
City-St-Zip: PARKLAND, FL 33076

Title: MGRM ( ) Delete  
Name: ZALKA, STEPHEN  
Address: 6437 NW 99TH AVE  
City-St-Zip: PARKLAND, FL 33076

Title: MGRM ( ) Delete  
Name: ZALKA, ADAM  
Address: 6437 NW 99TH AVE  
City-St-Zip: PARKLAND, FL 33076

Title: MGRM ( ) Delete  
Name: ZALKA, DAVID  
Address: 6437 NW 99TH AVE  
City-St-Zip: PARKLAND, FL 33076

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: STEPHEN M ZALKA

MGRM

07/09/2008

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