

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000083848

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Entity Name:** CARIBBEAN KAT'S TRADING CO. LLC

**Current Principal Place of Business:**

230A MAIN ST  
SAFETY HARBOR, FL 34695

**New Principal Place of Business:**

180 RACE TRACK ROAD N  
OLDSMAR FLEA MARKET BOOTH D19 WEST  
OLDSMAR, FL 34677

**Current Mailing Address:**

230A MAIN ST  
SAFETY HARBOR, FL 34695

**New Mailing Address:**

PO BOX 1712  
DUNEDIN, FL 34697

**FEI Number:** 26-0722601

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOFFMAN, KATHLEEN M  
1920 NUGGET DR  
CLEARWATER, FL 33755 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: MGRM  
Name: HOFFMAN, KATHLEEN M  
Address: 1920 NUGGET DR  
City-St-Zip: CLEARWATER, FL 33755 US

Title: MGR  
Name: HOFFMAN, ARTHUR A JR  
Address: 1920 NUGGET DR  
City-St-Zip: CLEARWATER, FL 33755 US

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: KATHLEEN M HOFFMAN

MGRM

04/23/2012

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