

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000005358

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** SANKOFA LLC

**Current Principal Place of Business:**

2001 N.W. 187 STREET  
MIAMI GARDENS, FL 33056 US

**New Principal Place of Business:**

**Current Mailing Address:**

2001 N.W. 187 STREET  
MIAMI GARDENS, FL 33056 US

**New Mailing Address:**

**FEI Number:** 26-1788970

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLEMAN, RICHARD B MR  
2001 NW 187 STREET  
MIAMI GARDENS, FL 33056 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:** COLEMAN, MICHAEL A  
**Address:** 2001 N.W. 187 STREET  
**City-St-Zip:** MIAMI GARDENS, FL 33056 US

**Title:** MGRM  
**Name:** COLEMAN, OWEN B  
**Address:** 2001 N.W. 187 STREET  
**City-St-Zip:** MIAMI GARDENS, FL 33056 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:** MICHAEL COLEMAN

MR.

04/30/2012

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