

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000056565

Entity Name: NALKEN, LLC

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

1151 SOUTH PARK RD.
#312
HOLLYWOOD, FL 33021

New Principal Place of Business:

1680 FRUITVILLE ROAD
S-102
SARASOTA, FL 34236

Current Mailing Address:

1151 SOUTH PARK RD.
#312
HOLLYWOOD, FL 33021

New Mailing Address:

6375 GOLDEN EYE GLN
BRADENTON, FL 34202 US

FEI Number: 98-0586159 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

KUCERA, TOMAS
1151 SOUTH PARK RD
#312
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

FLORIDA VENTURE PARTNERS, LLC
1680 FRUITVILLE
S-102
SARASOTA, FL 34236 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: IVO TRAVNICEK

05/01/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DYRS MIDOVA, MAGDALENA
Address: TRNOVA 26
City-St-Zip: PRAHA - ZAPAD, -- 25210 CZ

Title: MGRM () Delete
Name: SCHLOGER, EVZEN
Address: TRNOVA 28
City-St-Zip: PRAHA - ZAPAD, -- 25210 CZ

Title: MGRM () Delete
Name: BENES, DUSAN
Address: TRNOVA 26
City-St-Zip: PRAHA - ZAPAD, -- 25210 CZ

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:

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: EVZEN SCHLOGER

MGRM

05/01/2009

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