

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000107278

Entity Name: IJKM GROUP LLC

FILED  
Apr 11, 2011  
Secretary of State

## Current Principal Place of Business:

3662 AVALON PARK EAST BLVD  
SUITE 2062  
ORLANDO, FL 32828 US

## New Principal Place of Business:

12700 BISCAYNE BLVD.  
SUITE 202  
N. MIAMI, FL 33181 US

## Current Mailing Address:

3662 AVALON PARK EAST BLVD  
SUITE 2062  
ORLANDO, FL 32828 US

## New Mailing Address:

12700 BISCAYNE BLVD.  
SUITE 202  
N. MIAMI, FL 33181 US

FEI Number: 26-3739379

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HERRERA, THOMAS R  
3662 AVALON PARK EAST BLVD  
SUITE 2062  
ORLANDO, FL 32828 US

## Name and Address of New Registered Agent:

ZOUR, ISRAEL  
12700 BISCAYNE BLVD.  
SUITE 202  
N. MIAMI, FL 33181 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: ISRAEL ZOUR

04/11/2011

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM  
Name: CHAPMAN, MARTY J  
Address: 8927 J.M. KEYNES BLVD. STE. 360  
City-St-Zip: CHARLOTTE, NC 28262 US

Title: MGRM  
Name: MENDIOLA, JOSE I  
Address: 626 VERONA PLACE  
City-St-Zip: WESTON, FL 33326 US

Title: MGRM  
Name: YARNELL, KEITH A  
Address: 2150 N W 12 STREET  
City-St-Zip: DELRAY BEACH, FL 33445

Title: MGRM  
Name: ZOUR, ISRAEL  
Address: 12700 BISCAYNE BLVD. STE. 202  
City-St-Zip: N. MIAMI, FL 33181

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: ISRAEL ZOUR

MGRM

04/11/2011

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