

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000071600

FILED  
Apr 10, 2010  
Secretary of State

**Entity Name:** KAHN TECHNOLOGIES OF FLORIDA, LLC.

**Current Principal Place of Business:**

80 SW 8TH STREET  
SUITE 1870  
MIAMI, FL 33130

**New Principal Place of Business:**

**Current Mailing Address:**

80 SW 8TH STREET  
SUITE 1870  
MIAMI, FL 33130

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

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

KAHN-DRODY, SUSAN L  
80 SW 8TH STREET  
SUITE 1870  
MIAMI, FL 33130 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: KAHN, SIDNEY L IV.  
Address: 10520 LAKESIDE DRIVE  
City-St-Zip: CORAL GABLES, FL 33156

Title: MGRM  
Name: KAHN RECOVERABLE TRUST, SIDNEY L III.  
Address: 10520 LAKESIDE DRIVE  
City-St-Zip: CORAL GABLES, FL 33156

Title: MGRM  
Name: KAHN-DRODY, SUSAN L  
Address: 10615 LAKESIDE DRIVE  
City-St-Zip: CORAL GABLES, FL 33130

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: S. LANI KAHN DRODY                      MGRM                      04/10/2010

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