

# **2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L10000042443

**FILED**  
**May 25, 2012**  
**Secretary of State**

**Entity Name:** GOLDEN KRUST #5, LLC

**Current Principal Place of Business:**

9534 SW 160TH ST.  
MIAMI, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

1060 BRICKELL AVE 2417  
MIAMI, FL 33131 US

**New Mailing Address:**

**FEI Number:** 27-2173906

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLAYBORNE, KISHON A  
1060 BRICKELL AVE 2417  
MIAMI, FL 33131 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: CLAYBORNE, KISHON A  
Address: 1060 BRICKELL AVE 2417  
City-St-Zip: MIAMI, FL 33131 US

Title: VP  
Name: CLAYBORNE, KENDALL A  
Address: 6288 NW 42ND CT  
City-St-Zip: CORAL SPRINGS, FL 33067 US

Title: VP  
Name: CLAYBORNE, KENDRICK A  
Address: 6288 NW 42ND CT  
City-St-Zip: CORAL SPRINGS, FL 33067 US

Title: MGRM  
Name: CLAYBORNE, KEITH A  
Address: 6288 NW 42ND CT  
City-St-Zip: CORAL SPRINGS, FL 33067

Title: MGMR  
Name: CLAYBORNE, BERNADETTE P  
Address: 6288 NW 42ND CT  
City-St-Zip: CORAL SPRINGS, FL 33067

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: KISHON CLAYBORNE

MGRM

05/25/2012

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