

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000015355

Entity Name: H.K.M. OF TAMPA, LLC

**FILED**  
**Feb 02, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

6529 E. HILLSBOROUGH AVE.  
TAMPA, FL 33610

**New Principal Place of Business:**

**Current Mailing Address:**

6529 E. HILLSBOROUGH AVE.  
TAMPA, FL 33610

**New Mailing Address:**

FEI Number: 27-4756529

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TK REGISTERED AGENT, INC.  
C/O TRENAM KEMKER  
101 EAST KENNEDY BLVD., #2700  
TAMPA, FL 33602 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: MGR  
Name: PATEL, MADHUBEN K  
Address: 6529 E. HILLSBOROUGH AVE.  
City-St-Zip: TAMPA, FL 33610

Title: MGRM  
Name: PATEL, NILESH  
Address: 6529 E. HILLSBOROUGH AVE.  
City-St-Zip: TAMPA, FL 33610

Title: MGRM  
Name: PATEL, SUSHIL  
Address: 6529 E. HILLSBOROUGH AVE.  
City-St-Zip: TAMPA, FL 33610

Title: MGRM  
Name: PATEL, SANGITABEN  
Address: 6529 E. HILLSBOROUGH AVE.  
City-St-Zip: TAMPA, FL 33610

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: NILESH PATEL

MGR

02/02/2012

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