

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000000305

Entity Name: KARAL ASSOCIATES, L.C.

FILED  
Jun 29, 2005  
Secretary of State

## Current Principal Place of Business:

ATTN: M. BARRETT  
44 MIDWOOD ROAD  
ROCKVILLE CENTER, NY 11570

## New Principal Place of Business:

## Current Mailing Address:

ATTN: M. BARRETT  
44 MIDWOOD ROAD  
ROCKVILLE CENTER, NY 11570

## New Mailing Address:

FEI Number: 65-0820985      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:

## Name and Address of New Registered Agent:

BLATT, LEE  
471 NORTH ARROWHEAD TRAIL  
VERO BEACH, FL 32963      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM      ( ) Delete  
Name: BLATT, LEE  
Address: 471 NORTH ARROWHEAD TRAIL  
City-St-Zip: VERO BEACH, FL 32963

Title: MGR      ( ) Delete  
Name: BARRETT, MICHAEL  
Address: 44 MIDWOOD RD.  
City-St-Zip: ROCKVILLE CENTER, NY 11570

## ADDITIONS/CHANGES:

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 for the exemption stated in Section 119.07(3)(i), 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: MICHAEL BARRETT

MGR

06/29/2005

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