


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 04, 2008 08:00 A
Secretary of State

DOCUMENT # L98000000506	
1. Entity Name KIBOKI, LLC	

Principal Place of Business 1000 NUS HIGHWAY ONE JANICA 104 JUPITER FL 33477	Mailing Address 844 BROOKSIDE RD POTTSTOWN PA 19464
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02262008No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0832321	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**POMERANTZ, STEVEN A
6020 NW 67TH CT
PARKLAND, FL 33067**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when restate) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

U00000847248
03/19/08-80012-019 138.75

8. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GOODMAN, SHERYL 121 COGGESHALL AVENUE, UNIT 10 NEWPORT, RI 02840
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM POMERANTZ, HOWARD K TRUSTEE 844 BROOKSIDE RD POTTSTOWN, PA 19464
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM POMERANTZ, STEVEN A TRUSTEE 2000 MARKET STREET PHILADELPHIA, PA 19103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Howard K. Pomerantz* **HOWARD K. POMERANTZ**