

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000001518

Entity Name: GOLD KROWN, L.L.C.

FILED  
Apr 04, 2005  
Secretary of State

**Current Principal Place of Business:**

C/O KRONGOLD AND TODD, P.A.  
201 ALHAMBRA CIRCLE, 8TH FLOOR  
CORAL GABLES, FL 33134

**Current Mailing Address:**

C/O KRONGOLD AND TODD, P.A.  
201 ALHAMBRA CIRCLE, 8TH FLOOR  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

C/O KRONGOLD & SINGER, P.L.  
1441 BRICKELL AVE., SUITE 1430  
MIAMI, FL 33131 US

**New Mailing Address:**

C/O KRONGOLD & SINGER, P.L.  
1441 BRICKELL AVE., SUITE 1430  
MIAMI, FL 33131 US

FEI Number: 65-0903986

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KRONGOLD, M. RONALD  
KRONGOLD AND TODD, P.A.  
201 ALHAMBRA CIRCLE, 8TH FLOOR  
CORAL GABLES, FL 33134 US

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

KRONGOLD, M. RONALD  
FOUR SEASONS OFFICE TOWER  
1441 BRICKELL AVE., SUITE 1430  
MIAMI, FL 33131 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: \_\_\_\_\_

04/04/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: KRONGOLD, M. RONALD  
Address: 201 ALHAMBRA CIRCLE, SUITE 801  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR ( ) Delete  
Name: KRONGOLD, RANDI M  
Address: 201 ALHAMBRA CIRCLE, SUITE 801  
City-St-Zip: CORAL GABLES, FL 33134

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: KRONGOLD, M. RONALD  
Address: 1441 BRICKELL AVE., SUITE 1430  
City-St-Zip: MIAMI, FL 33131 US

Title: MGR (X) Change ( ) Addition  
Name: KRONGOLD, RANDI M  
Address: 1441 BRICKELL AVE., SUITE 1430  
City-St-Zip: MIAMI, FL 33131 US

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: M RONALD KRONGOLD

MGR

04/04/2005

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