2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000002393

Entity Name: KAHKAHMOON, L.C.

City-St-Zip:

DELRAY BEACH, FL 33435

FILED Feb 09, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 16356 BRIDLEWOOD CIRCLE DELRAY BEACH, FL 33445 **Current Mailing Address: New Mailing Address:** 16356 BRIDLEWOOD CIRCLE DELRAY BEACH, FL 33445 FEI Number: 65-0925511 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KAUFMAN, MICHAEL 16356 BRIDLEWOOD CIRCLE DELRAY BEACH, FL 33435 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete KAUFMAN, MICHAEL Name: Name: Address: 16356 BRIDLEWOOD CIRCLE Address: City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: BETH, KAUFMAN Name: Address: 16356 BRIDLEWOOD CIRCLE Address: City-St-Zip: DELRAY BEACH, FL 33435 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MICHELLE, KAUFMAN Name: Name: 16356 BRIDLEWOOD CIRCLE Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

City-St-Zip:

SIGNATURE: MICHAEL I KAUFMAN MGRM 02/09/2006