

**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jul 19, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # M04000003513**

1. Entity Name  
**K & S DAVINCI ESTATES, LLC**



Principal Place of Business  
**7001 BRUSH HOLLOW ROAD**  
**WESTBURY, NY 11590**

Mailing Address  
**7001 BRUSH HOLLOW ROAD**  
**WESTBURY, NY 11590**



06302005 No Chg-LLC CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number **20-1536928** Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$5.00** Additional Fee Required

**6. Name and Address of Current Registered Agent**

**NATIONSCORP REGISTERED AGENTS, INC.**  
**526 E. PARK AVENUE**  
**TALLAHASSEE, FL 32301**

**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 reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00**  
**Due by September 7, 2005**

**9. MANAGING MEMBERS/MANAGERS**

TITLE **MGRM**  
 NAME **KALIKOW, EDWARD**  
 STREET ADDRESS **7001 BRUSH HOLLOW ROAD**  
 CITY-ST-ZIP **WESTBURY, NY 11590**

TITLE **MGRM**  
 NAME **SHALIK, EUGENE**  
 STREET ADDRESS **7001 BRUSH HOLLOW ROAD**  
 CITY-ST-ZIP **WESTBURY, NY 11590**

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000000373551  
 07/19/05-80003-007 50.00

**DO NOT WRITE**  
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11. I hereby certify that the information supplied with this filing does not qualify 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 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:

7/19/05 STG. 8764800