


# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Feb 23, 2004 8:00 am**  
**Secretary of State**

02-23-2004 90343 050 \*\*\*\*50.00

<b>DOCUMENT # M98000001479</b>					
<b>1. Entity Name</b> KMI INTERNATIONAL LLC					
<b>Principal Place of Business</b> 2511 PARK ST. LAKE WORTH, FL 33460			<b>Mailing Address</b> 2501 PARK ST. LAKE WORTH, FL 33460		
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 65-0859121	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$5.00 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  RODRIGUEZ, CARLOS 1885 E. TERRACE DR. LAKE WORTH, FL 33460			<b>7. Name and Address of New Registered Agent</b> Name <u>CARLOS A. RODRIGUEZ</u> Street Address (P.O. Box Number is Not Acceptable) <u>2501 PARK STREET</u> City <u>LAKE WORTH</u> <u>FL</u> Zip Code <u>33460</u>		
<b>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.</b>  SIGNATURE <u>CARLOS A. RODRIGUEZ</u> DATE _____ <small>(NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$50.00 Due by May 1, 2004</b>		<b>Make check payable to Florida Department of State</b>			
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RODRIGUEZ, CARLOS 2501 PARK ST. LAKE WORTH, FL 33460		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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<b>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.</b>					
<b>SIGNATURE:</b> <u>CARLOS A. RODRIGUEZ</u> <u>1/24/04</u> <u>(561) 578-8702</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					

24013401



01132004 Chg-LLC CR2E083 (10/03)

**4. FEI Number**  
65-0859121

Applied For  
Not Applicable

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

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

RODRIGUEZ, CARLOS  
1885 E. TERRACE DR.  
LAKE WORTH, FL 33460

**7. Name and Address of New Registered Agent**

Name CARLOS A. RODRIGUEZ  
 Street Address (P.O. Box Number is Not Acceptable) 2501 PARK STREET  
 City LAKE WORTH FL Zip Code 33460

**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 CARLOS A. RODRIGUEZ DATE \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00 Due by May 1, 2004**

**Make check payable to Florida Department of State**

**9. MANAGING MEMBERS/MANAGERS**

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**10. ADDITIONS/CHANGES**

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**SIGNATURE:** CARLOS A. RODRIGUEZ 1/24/04 (561) 578-8702  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE