## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000017149

Entity Name: GOLDEN KRUST #1, LLC

**Current Principal Place of Business:** 

5967 WEST OAKLAND PARK BLVD.

LAUDERHILL. FL 33313

**Current Mailing Address:** 

3301 NE 1ST AVE.

PH-6

MIAMI, FL 33137 US

FEI Number: 27-1890393 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

CLAYBORNE, KYLE AARON 5967 WEST OAKLAND PARK BLVD. LAUDERHILL, FL 33313 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: KYLE A. CLAYBORNE 03/24/2018

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title Title MANAGING MEMBER MGRM Name CLAYBORNE, KEITH A Name CLAYBORNE, KYLE A

Address 3301 NE 1ST AVE. Address 3301 NE 1ST AVE. PH-6 PH<sub>6</sub>

City-State-Zip: MIAMI FL 33137 MIAMI FL 33137 City-State-Zip:

Title MANAGING MEMBER Title MANAGING MEMBER CLAYBORNE, BERNADETTE P CLAYBORNE, KISHON A Name Name Address 3301 NE 1ST AVE. Address 2010 NW 125TH TERRACE

PH<sub>6</sub>

City-State-Zip: PEMBROKE PINES FL 33028 City-State-Zip: MIAMI FL 33137

Title MANAGING MEMBER Title MANAGING MEMBER

Name CLAYBORNE, KENDRICK A Name CLAYBORNE, KENDALL A

Address 2501 BRICKELL AVE. Address 3672 SW 93RD AVE. #707

City-State-Zip: MIAMI FL 33129 City-State-Zip: MIRAMAR FL 33025

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KEITH A. CLAYBORNE

**MGRM** 

03/24/2018

**FILED** Mar 24, 2018

**Secretary of State** 

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