

H

DOMESTIC LIMITED LIABILITY PARTNERSHIP ANNUAL REPORT AS OF:
PARTNERSHIP NAME AND MAILING ADDRESS:

(If the above mailing address has changed, line out and print change to the right.)

1. Principal Office Address: (If any change, line out and print change to the right)

2. NATURE OF BUSINESS: (Optional)

(To correct, line out and print corrections below. If inactive during the period, state INACTIVE.)

3. The name of the registered agent and the registered agent's street address of the place of business in Hawaii of the person to which service of process and other notice and documents being served on or sent to the entity represented by it may be delivered to. (If any change, line out and print change on the right. See reverse side for instructions.).

4. None of the partners is either a minor or incompetent person.

5. Below are the name and address of each partner.

(If there were any changes to the list, line out deleted names or insert new names and addresses.)

NAME IN FULL

ADDRESS (INCLUDE CITY, STATE & ZIP CODE)

CERTIFICATION

I certify under the penalties of Section 425-172, Hawaii Revised Statutes, that I have read the above and the information is true and correct, and I am authorized to sign this report.

DATE: _____

Signature of authorized partner

Print Name

INSTRUCTIONS

(If any questions, call (808) 586-2727)

The annual report must be typewritten or printed in Black Ink, and must be legible. The report must be signed in black ink and certified by an authorized partner.

The filing fee of \$ 15.00 must be submitted with the report. Make check payable to the DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS. Filing fee is not refundable. Your cancelled check is your receipt. There is a \$ 25.00 charge for all dishonored checks.

Failure to file an annual report for any year within the prescribed time will make each partner liable severally to the State in the amount of \$25 for each and every month while the default shall continue. The Director of Commerce and Consumer Affairs may revoke the statement of qualification of a limited liability partnership for failure to file an annual report for a period of two years.

1. State the address of the limited liability partnership's principal office.
2. (Optional) State a brief description of the nature of business. If inactive for the period, state INACTIVE. (Annual report must be filed for the period, even though the partnership was inactive.)
3. State the name of the registered agent and the complete street address (including number, street, city, state, and zip code) in Hawaii. The agent must be an individual resident of Hawaii, a domestic entity, or a foreign entity authorized to transact business or conduct affairs in the State of Hawaii. A domestic partnership cannot be its own agent. (The Director of Commerce and Consumer Affairs may cancel the registration for failure to maintain a registered agent and registered office.)
4. The statement that none of the partners is either a minor or incompetent person is required.
5. State the names and business addresses of all partners.

Due Date: Effective January 1, 2003, for a domestic or foreign limited liability partnership whose date of registration in this State falls between:

- (1) January 1 and March 31, an annual report shall be filed on or before March 31 of each year and shall reflect the state of the partnership's affairs as of January 1 of the year when filed;
- (2) April 1 and June 30, an annual report shall be filed on or before June 30 of each year and shall reflect the state of the partnership's affairs as of April 1 of the year when filed;
- (3) July 1 and September 30, an annual report shall be filed on or before September 30 of each year and shall reflect the state of the partnership's affairs as of July 1 of the year when filed; and
- (4) October 1 and December 31, an annual report shall be filed on or before December 31 of each year and shall reflect the state of the partnership's affairs as of October 1 of the year when filed.

New partnerships: An annual report is not required to be filed in the year the limited liability partnership was registered.

This material can be made available for individuals with special needs. Please call the Division Secretary, Business Registration Division, DCCA, at 586-2744, to submit your request. All Business Registration filings are open to public inspection. (Section 92F-11, HRS)

Mail the completed report with fee to:
Annual filing - BREG
P.O. Box 40
Honolulu, HI 96810

DID YOU REMEMBER TO SIGN YOUR REPORT AND CHECK?

Renew online at www.ehawaii.gov/annuals