


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 03, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000032743 1. Entity Name SIR INVESTMENTS & DEVELOPMENTS L.L.C.	
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Principal Place of Business 2742 BISCAYNE BLVD MIAMI, FL 33137	Mailing Address 2742 BISCAYNE BLVD MIAMI, FL 33137
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DO NOT WRITE IN THIS SPACE



04282006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 03-0495592	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MATZ, ISAAC
2742 BISCAYNE BLVD
MIAMI, FL 33137

**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 _____
Signature, typed or printed name of registered agent and title if applicable.

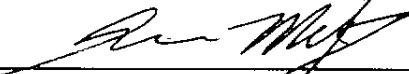
**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM YUKEN, SALOMON 2742 BISCAYNE BLVD MIAMI, FL 33137
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MATZ, RUBEN 2742 BISCAYNE BLVD MIAMI, FL 33137
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MATZ, ISAAC 2742 BISCAYNE BLVD MIAMI, FL 33137
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05/19/06-80043-017 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date _____ Daytime Phone # _____