

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 04, 2003 8:00 am
Secretary of State

03-04-2003 90156 032 ****50.00

DOCUMENT # L02000034950

1. Entity Name



SK CONSTRUCTION SERVICES, LLC

30040018

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business 155 S. Miami Avenue Suite, Apt. #, etc. PH-2A City & State Miami, FL Zip 33130 Country Miami-Dade		3. Mailing Address 155 S. Miami Avenue Suite, Apt. #, etc. PH-2A City & State Miami, FL Zip 33130 Country Miami-Dade	
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4. FEI Number 05-0549458	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name Registered Agents of Florida, LLC	
Street Address (P.O. Box Number is Not Acceptable) 100 S.E. 2nd Street	
Suite 2900	
City Miami	FL Zip Code 33131

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

FEE IS \$50.00
Make Check Payable to Florida Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Managing Member Dominique Sirlin 155 S. Miami Avenue, PH-2A Miami, FL 33130
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Managing Member Linda Krinsky 155 S. Miami Avenue, PH-2A Miami, FL 33130
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CR2E083B (12/02)

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: Linda Krinsky Date: 2-28-03 Daytime Phone #: 305-374-5455
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE