


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90024 008 ****50.00

DOCUMENT # L02000034973
1. Entity Name
SK CYPRESS, LLC



Principal Place of Business 155 S. MIAMI AVE., PH 2-A MIAMI, FL 33130	Mailing Address 155 S. MIAMI AVE., PH 2-A MIAMI, FL 33130
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60036343



DO NOT WRITE IN THIS SPACE

04272006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 05-0549459	Applied For Not Applicable
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5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
SIRLIN, DANIEL
155 S MIAMI AVE PH2A
MIAMI, FL 33130

155 S. Miami Ave. PH2A

**DO NOT WRITE
IN THIS SPACE**

8. The above named agent 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 4-26-06

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SIRLIN, DANIEL 155 S MIAMI AVE PH-2A MIAMI, FL 33130
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KRISKY, JEFF Krinsky, Jeff 155 S MIAMI AVE PH 2A MIAMI, FL 33130
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**DO NOT WRITE
IN THIS SPACE**

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:  Date 4-26-06 Daytime Phone # 305-374-7075

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE