2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

Secretary of State 06-09-2006 90136 019 ****50.00 DOCUMENT # L00000005926 S & R ENTERPRISES, LLC **しいみ1だいりみ** Principal Place of Business Mailing Address P.O. BOX 2291 2180 MAIN ST. SARASOTA, FL 34230 SARASOTA, FL 34237 04242006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1011003 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FRANGIE, RAMSEY J DO NOT WRITE 2180 MAIN ST. SARASOTA, FL 34237 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS TITLE FRANGIE, RAMSEY NAME STREET ADDRESS 3521 ALMERIA ST. SARASOTA, FL 34239 CITY-ST-ZIP VΡ TITLE FRANGIE, RAMSEY NAME STREET ADDRESS 3521 ALMERIA AVE CITY-ST-ZIP SARASOTA, FL 34239 TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

with MS filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information 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 stee empowered to execute this report as required by Chapter 608, Florida Statutes. I hereby certify that the information supplied indicated on this report is true and account limited liability company or the receiper or

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

> SIGNATURE AND TYPE FOR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED Jun 09, 2006 8:00 am