2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000014748

1. Entity Name
KJR INTRACOASTAL LLC

Principal Place of Business	Mailing Address
3501 NE 163RD ST.	24500 CHAGRIN BLVD., #200
NORTH MIAMI, FL 33160	BEACHWOOD, OH 44122

DO NOT WRITE IN THIS SPACE

30001372

02172006 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
34-6769095	Not Applicable

5. Certificate of Status Desired ☐	**$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

RISMAN, ROBERT R
2630 S. OCEAN BLVD., SUITE 704
PALM BEACH, FL 33480

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.
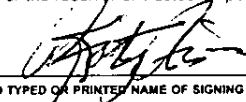
SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2006

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	RISMAN, KATHY J
STREET ADDRESS	24500 CHAGRIN BLVD #200
CITY-ST-ZIP	BEACHWOOD, OH 44122

TITLE	
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CITY-ST-ZIP	

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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: _____ Kathy J. Risman, Manager   2/20/06   216-464-5130

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #