


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90051 024 ****50.00

DOCUMENT # L01000008828

1. Entity Name
KSJR, LLC



Principal Place of Business Mailing Address


3900 SW 30 AVENUE #3 FORT LAUDERDALE, FL 33312 **3900 SW 30 AVENUE #3 FORT LAUDERDALE, FL 33312**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country



04212006 Chg-LLC CR2E083 (11/05)

4. FEI Number
65-1109103 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

RICHARDSON, KENNETH E
3900 SW 30TH AVENUE
SUITE 3
FT. LAUDERDALE, FL 33312

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2006 **Make check payable to Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

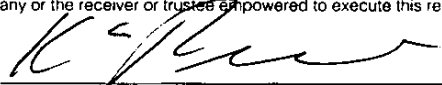
TITLE	MGR	<input type="checkbox"/> Delete
NAME	RICHARDSON, KENNETH E	
STREET ADDRESS	3900 SW 30 AVENUE STE 3	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33312	
TITLE	MGR	<input type="checkbox"/> Delete
NAME	CARSON, JAMES	
STREET ADDRESS	5 PELICAN ISLE	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33301	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS/CHANGES

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADD		
CITY-ST-ZII		
TITLE		<input type="checkbox"/> Addition
NAME		
STREET ADD		
CITY-ST-ZII		
TITLE		<input type="checkbox"/> Addition
NAME		
STREET ADD		
CITY-ST-ZII		
TITLE		<input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

OK RDH
KEEP MFC CORP COST OPEN
FOR C.S. \$
CK.
4/26/08
1 YEAR ONLY CARSON ISSUES.

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 _____ Daytime Phone # _____

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