2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000028627

1. Entity Name
S & R INVESTMENT, LLC

Principal Place of Business	Mailing Address
10101 COLLINS AVE., UNIT 9A BAL HARBOUR, FL 33154	10101 COLLINS AVE., UNIT 9A BAL HARBOUR, FL 33154

DO NOT WRITE IN THIS SPACE

04172006No Chg-LLC CR2E083 (11/05)

4. FEI Number
56-2387411

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

YUKEN, SALOMON
10101 COLLINS AVE., UNIT 9A
BAL HARBOUR, FL 33154

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6. 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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	YUKEN, SALOMON
STREET ADDRESS	10101 COLLINS AVE 9A
CITY-ST-ZIP	BAL HARBOUR, FL 33154
TITLE	P
NAME	YUKEN, ROSA
STREET ADDRESS	10101 COLLINS AVE 9A
CITY-ST-ZIP	BAL HARBOUR, FL 33154
TITLE	P
NAME	YUKEN, JAIME
STREET ADDRESS	10101 E BAY HARBOR DR #704
CITY-ST-ZIP	BAY HARBOUR, FL 33154
TITLE	P
NAME	YUKEN, INGRID
STREET ADDRESS	10101 COLLINS AVE, #9A
CITY-ST-ZIP	BAY HARBOUR, FL 33154
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/12/06-80064-012 55.00

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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: SALOMON YUKEN 4/28/06 305-374-4412
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #