

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

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

04-04-2006 90009 035 ****50.00

DOCUMENT # L04000023392

1. Entity Name

SJR INVESTMENTS REAL ESTATE LLC



Principal Place of Business

**100 NW 170 STREET
SUITE 301
MIAMI FL 33169
US**

Mailing Address

**100 NW 170 STREET
SUITE 301
MIAMI FL 33169
US**



2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

1st MOORE

CR2E083 (10/05)

City & State

City & State

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TAHER, RASHID
100 NW 170 STREET
SUITE 301
MIAMI FL 33169**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2006

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGRM ☒ Delete
NAME HALL, JOHN
STREET ADDRESS 2805 EAST KENWOOD BLVD.
CITY-ST-ZIP MILWAUKEE WI 53211

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM ☐ Delete
NAME ROBICSEK, STEVEN
STREET ADDRESS MDDC BOX 100254, DEPT. OF ANESTHESIOLOGY
CITY-ST-ZIP GAINESVILLE FL 32608

TITLE MGRM ☒ Change ☐ Addition
NAME Robicsek, Steven
STREET ADDRESS 2534 SW 14th Drive
CITY-ST-ZIP Gainesville, FL 32608

TITLE MGRM ☐ Delete
NAME TAHER, RASHID
STREET ADDRESS 100 NW 170 STREET, SUITE 301
CITY-ST-ZIP MIAMI FL 33169

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM ☒ Delete
NAME Gabrielli, Andrea
STREET ADDRESS 1625 NW 61st Terrace
CITY-ST-ZIP Gainesville, FL 32605

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

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

Date

Daytime Phone #

Rashid Taher

3/25/06