

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000029283

Entity Name: SR INVESTMENTS & HOLDINGS LLC

FILED
Apr 24, 2007
Secretary of State

Current Principal Place of Business:

10235 WEST SAMPLE ROAD, SUITE 110
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 8983
CORAL SPRINGS, FL 33075

New Mailing Address:

FEI Number: 20-1044285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DATA, RAJ
10235 W. SAMPLE ROAD
110
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DATA, RAJ
Address: 10235 WEST SAMPLE ROAD, SUITE 110
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGR () Delete
Name: DATA, SHAFALI
Address: 10235 WEST SAMPLE ROAD, SUITE 110
City-St-Zip: CORAL SPRINGS, FL 33065

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Title: MGRM () Delete
Name: DATA, RAJ
Address: 10235 WEST SAMPLE ROAD, SUITE 110
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: RAJ DATA

MGRM

04/24/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date