

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000040928

Entity Name: SID-S MANAGEMENT, LLC

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

5500 COLLINS AVE
SUITE 1604
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

5500 COLLINS AVE
SUITE 1604
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 76-0759819

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUSSMAN, JEANETTE
5500 COLLINS AVE
SUITE 1604
MIAMI BEACH, FL 33140 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: SUSSMAN, SELIG
Address: 5500 COLLINS AVENUE #1604
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGRM () Delete
Name: SUSSMAN, JEANETTE
Address: 5500 COLLINS AVENUE #1604
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGRM () Delete
Name: KERR, ABBE
Address: 5500 COLLINS AVENUE #1604
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGRM () Delete
Name: MCCLEARY, JUDITH
Address: 5500 COLLINS AVENUE #1604
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGRM () Delete
Name: SUSSMAN, HAROLD 5
Address: 5500 COLLINS AVENUE #1604
City-St-Zip: MIAMI BEACH, FL 33140

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:

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

I hereby certify that the information supplied with this filing does not qualify 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: SELIG SUSSMAN

MM

04/30/2008

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