

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L05000047552

1. Entity Name
SHIR HOLDINGS, LLC



Principal Place of Business
500 S.E. MIZNER BOULEVARD
APT. 909
BOCA RATON, FL 33432

Mailing Address
500 S.E. MIZNER BOULEVARD
APT. 909
BOCA RATON, FL 33432

FILED

Feb 26, 2007 08:00 AM
Secretary of State



02142007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3223170

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

YARIV, JOSEPH
500 S.E. MIZNER BOULEVARD
APT. 909
BOCA RATON, FL 33432

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
YARIV, JOSEPH
500 S.E. MIZNER BOULEVARD, APT. 909
BOCA RATON, FL 33432

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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03/07/07-80055-013 50.00

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IN THIS SPACE**

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

Date: 2/17/07 5613 Daytime Phone #