2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# L05000094349

Entity Name: SGS INVESTMENTS, LLC

Current Principal Place of Business:

1600 S. DIXIE HIGWAY
SUITE Q
LAKE WORTH, FL 33460 US

New Principal Place of Business:

Current Mailing Address:

1260 PINE SAGE CIRCLE
WEST PALM BEACH, FL 33409 US

New Mailing Address:

FEI Number: 83-0439622 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOUIS-JEAN, DUMESLE
1260 PINE SAGE CIRCLE
WEST PALM BEACH, FL 33409 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:	MGR	( ) Delete
Name:	LOUIS-JEAN, DUMESLE	
Address:	1260 PINE SAGE CIRCLE	
City-St-Zip:	WEST PALM BEACH, FL 33409 US	
Title:	MGRM	( ) Delete
Name:	LUBIN, GINETTE	
Address:	1260 PINE SAGE CIRCLE	
City-St-Zip:	WEST PALM BEACH, FL 33409 US	
Title:	MGRM	(X) Delete
Name:	CHARLES, WINSOR	
Address:	878 BELMONT DRIVE	
City-St-Zip:	WEST PALM BEACH, FL 33415 US	

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:	

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: DUMESLE LOUIS-JEAN PRES 04/30/2007

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