

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000095406

Entity Name: SJR ENTERPRISES, LLC

FILED
Jul 03, 2006
Secretary of State

Current Principal Place of Business:

1969 SOUTH ALAFAYA TRAIL
SUITE 239
ORLANDO, FL 32828

New Principal Place of Business:

1969 SOUTH ALAFAYA TRAIL
SUITE 357
ORLANDO, FL 32828

Current Mailing Address:

1969 SOUTH ALAFAYA TRAIL
SUITE 239
ORLANDO, FL 32828

New Mailing Address:

1969 SOUTH ALAFAYA TRAIL
SUITE 357
ORLANDO, FL 32828

FEI Number: 20-3567880 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

RISSI, STEVEN J
1969 SOUTH ALAFAYA TRAIL
SUITE 239
ORLANDO, FL 32828 US

Name and Address of New Registered Agent:

RISSI, STEVEN J
1969 SOUTH ALAFAYA TRAIL
SUITE 357
ORLANDO, FL 32828 US

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: STEVEN J RISSI

07/03/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RISSI, STEVEN J
Address: 1969 ALAFAYA TRAIL, SUITE 239
City-St-Zip: ORLANDO, FL 32828

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RISSI, STEVEN J
Address: 1969 SOUTH ALAFAYA TRAIL, SUITE 357
City-St-Zip: ORLANDO, FL 32828

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: STEVEN J RISSI

PRES

07/03/2006

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