2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000002891

Address:

City-St-Zip:

Entity Name: SIGMA HOSPITALITY, LLC

FILED May 02, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11318 OKEECHOBEE BLVD. ROYAL PALM BEACH, FL 33411 **Current Mailing Address: New Mailing Address:** 11318 OKEECHOBEE BLVD ROYAL PALM BEACH, FL 33411 FEI Number: 56-1980264 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () 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: Name and Address of New Registered Agent: WOHLSIFER & ASSOCIATES, P.A MAGAN, DIPAK 319 CLEMATIS STREET, SUITE 811 9938 SHEPARD PLACE WEST PALM BEACH, FL 33401 US WELLINGTON, FL 33414 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: DIPAK MAGAN 05/02/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MAGAN, DIPAK Name: Name: 9938 SHEPARD PLACE Address: Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: Title: MGRM Title: () Delete () Change () Addition Name: MAGAN, RITA Name: Address: 9938 SHEPARD PLACE Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition BELLAMY, SEJAL PATEL, SUKETU Name: Name: 9906 ALEXANDRA CIRCLE 2165 WIDENER TERRACE Address: Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: WELLINGTON, FL 33414 Title: () Delete Title: MGRM () Change (X) Addition Name: Name: PATEL, SUMIT

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.

Address:

City-St-Zip:

2247 STOTESBURY WAY

WELLINGTON, FL 33414

SIGNATURE: DIPAK MAGAN MGRM 05/02/2006