

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000002891

Entity Name: SIGMA HOSPITALITY, LLC

FILED
Apr 18, 2007
Secretary of State

Current Principal Place of Business:

11318 OKEECHOBEE BLVD.
ROYAL PALM BEACH, FL 33411

New Principal Place of Business:

Current Mailing Address:

11318 OKEECHOBEE BLVD.
ROYAL PALM BEACH, FL 33411

New Mailing Address:

FEI Number: 56-1980264

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAGAN, DIPAK
9938 SHEPARD PLACE
WELLINGTON, FL 33414 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: MAGAN, DIPAK
Address: 9938 SHEPARD PLACE
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM () Delete
Name: MAGAN, RITA
Address: 9938 SHEPARD PLACE
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM () Delete
Name: PATEL, SUKETU
Address: 2165 WIDENER TERRACE
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM () Delete
Name: PATEL, SUMIT
Address: 2247 STOTESBURY WAY
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change () Addition
Name: PATEL, SUKETU
Address: 2208 WIDENER TERRACE
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM (X) Change () Addition
Name: PATEL, SUMIT
Address: 2192 WIDENER TERRACE
City-St-Zip: WELLINGTON, FL 33414

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: DIPAK MAGAN

MGRM

04/18/2007

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