2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 20, 2005 8:00 am Secretary of State

DOCUMENT # L02000013705 1. Entity Name DJ HEAVEN ENTERPRISES, LLC							04-20-200.	5 90042 049 *	****50	0.00	
Principal Place of Business Mailing Address							•				
2667-2695 LAKE HAVEN RD 2784 IRMA LAKE DR. WEST PALM BEACH, FL 33415 US WEST PALM BEACH, FL 3				. 33411			•				
								III B1 :11	1011 (01	161 1641	
2. Principal Place of Business			3. Mailing Address 4971 Bonsai, Circle								
Suite, Apt. #, etc.			Suite, Apt. #, etc. # 20 \			0411200	5 Chg-LLC	CR2E083 (10			
City & State			Palm Beach Gardens FL			4. FEI Nur FL 01-0	mber 721246		Not	plied For Applicable	
Zip	Country		33418 Coun		try	5. Certificate of Status Desired		□ \$5.00 Additional Fee Required			
	6. Name	and Address of Current F	Registered Agent		N	7Name a	and Address of New	Registered Agent			
					Name						
FAIRCLOUGH, MICHAEL J 11380 PROSPERITY FARMS RD., STE. 112 PALM BEACH GARDENS, FL 33410					Street Ad	ddress (P.O. Box Nu	mber is Not Acceptab	le)			
					City			FL Zi	p Code	1	
	named entity ions of regist		the purpose of changing its	registere	ad office or	registered agent, or	both, in the State of F	lorida. I am familia	r with, a	and accept	
SIGNATURE .	Signature Wood	or printed name of registered agent a	nd title if applicable. (NOT	E: Registered	d Agent signatu	re required when reinstating	1	DATE			
Fi Di	iling Fee i ue by May	s \$50.00 y 1, 2005					I	ke check payabl la Department o		,	
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11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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:

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

417/05 Date

(61)762-430