Not Applicable

\$5.00 Additional

Fee Required

2003 LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

Mailing Address

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

MIAMI FL 33189

7900 SW 197TH TERR.

DOCUMENT # L02000020813

1. Entity Name

Principal Place of Business

2. Principal Place of Business

7900 SW 197TH TERR.

Suite, Apt. #, etc.

City & State

Zip

9.

STREET ADDRESS

CITY-ST-ZIP

MIAMI FL 33189

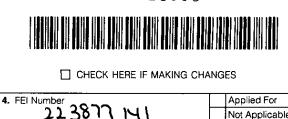
R.J.'S INVESTMENT COMPANY A LIMITED LIABILITY CO MPANY, L.L.C.



FILED Jan 22, 2003 8:00 am Secretary of State

01-22-2003 90106 008 ****50.00

20014893



WEBER RASKIN, KATHLEEN M 9990 SW 77TH AVE. SUITE 311 **MIAMI FL 33156**

Country

- -- 6.-Name and Address of Current Registered Agent --

MANAGING MEMBERS/MANAGERS

7.: Name and Address of New Registered Agent									
Name									
Street Addres	ss (P.O. Box Numbe	er is Not Acceptal	ole)						
Dity			FL	Zip Code	<u> </u>				
office or regio	torad agest or bat	th in the Ctata of I	Tarida Lamafan	- iliaa with aaad a					

ADDITIONS/CHANGES

5. Certificate of Status Desired

8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Country

FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003

10.

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SEWNARINE, RAMRAJ 7900 SW 197TH TERR. MIAMI FL 33189	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
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TITLE		☐ Delete	TITLE		☐ Change	☐ Addition

11. I hereby certify that the information supplied with this filing 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 ingreceiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

STREET ADDRESS