# 2007 LIMITED LIABILITY COMPANY
## ANNUAL REPORT

**DOCUMENT # L04000035794**

**1.** Entity Name
JACQUES OF ALL TRADES LLC

| Principal Place of Business | Mailing Address |
|---|---|
| 5655 39TH STREET<br>VERO BEACH, FL 32966    US | 5655 39TH STREET<br>VERO BEACH, FL 32966    US |

## DO NOT WRITE IN THIS SPACE

01102007 No Chg-LLC          CR2E083 (11/05)

| **4.** FEI Number | Applied For |
|---|---|
| 20-1105193 | Not Applicable |

**5.** Certificate of Status Desired   ☐   **$5.00** Additional Fee Required

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

JACQUES, PAUL
5655 39TH STREET
VERO BEACH, FL 32966

## DO NOT WRITE
## IN THIS SPACE

**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 _____

Signature, typed or printed name of registered agent and title if applicable        (NOTE: Registered Agent signature required when reinstating)        DATE

**Filing Fee is $50.00**
**Due by May 1, 2007**

| **9.** | MANAGING MEMBERS/MANAGERS |
|---|---|
| TITLE | MGRM |
| NAME | PAUL, JACQUES |
| STREET ADDRESS | 5655 39TH STREET |
| CITY-ST-ZIP | VERO BEACH, FL 32960 |
| TITLE | |
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03/30/07-80061-004 50.00

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**11.** I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _Paul Jy_ _____   3/20/07   772-562-8785

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE        Date        Daytime Phone #