


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 27, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000003587**

1. Entity Name  
**J3 ENTERPRISE, L.L.C.**



Principal Place of Business 12942 SW 26TH ST DAVIE, FL 33325	Mailing Address 12942 SW 26TH ST DAVIE, FL 33325
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**DO NOT WRITE IN THIS SPACE**



04172007 No Chg-LLC      CR2E083 (11/05)

4. FEI Number 41-2165060	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**WILLIAMS, JAMES P**  
 12942 SW 26TH ST  
 DAVIE, FL 33325

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

**Filing Fee Is \$50.00 Due by May 1, 2007**

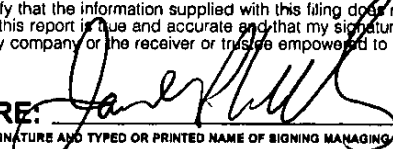
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WILLIAMS, JAMES P 12942 SW 26TH ST DAVIE, FL 33325
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WILLIAMS, JANET A 12942 SW 26TH ST DAVIE, FL 33325
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 05/11/07-80060-020 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:**       **4/16/07 3052989662**

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