2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000017738

1. Entity Name A&J. LLC

Apr 11, 2007 08:00 A Secretary of State

FILED

Principal Place of Business

460 21ST AVENUE NORTHEAST ST. PETERSBURG, FL 33704

Mailing Address

460 21ST AVENUE NORTHEAST ST. PETERSBURG, FL 33704



04092007 No Chg-LLC

CR2E083 (11/05)

Applied For 4. FEI Number 26-0007669 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

C/O CAREY, O'MALLEY, WHITAKER & MANSON, PA 712 SOUTH OREGON AVENUE TAMPA, FL 33606			NOT WRITE THIS SPACE
	named entity submits this statement for the purpose of changing of registered agent.	ging its registered office or registered agent, or be	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typod or printed name of registered agent and litle if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
	lling Fee is \$50.00 ue by May 1, 2007		000000700403
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RISLER, JAMES C 460 21ST AVENUE NORTHEAST ST. PETERSBURG, FL 33704		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RISLER, ANN 460 21ST AVENUE NORTHEAST ST. PETERSBURG, FL 33704		
TITLE NAME STREET ADDRESS CITY-SY-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN :	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME* STREET ADDRESS*	. A find the second of the second		

11. I hereby certify that the information supplied with this filling 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 support 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE