2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 14, 2008 08:00 AM
Secretary of State

DOCUMENT # L00000003937

1. Entity Name
JBE INVESTORS, LLC

Principal Place of Business	Mailing Address
1320 SOUTH DIXIE HWY STE 940 CORAL GABLES, FL 33146	1320 SOUTH DIXIE HWY STE 940 CORAL GABLES, FL 33146

DO NOT WRITE IN THIS SPACE

04042008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
65-0987309
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

HERSKOWITZ, JEROME
1320 SOUTH DIXIE HWY, STE 940
CORAL GABLES, FL 33146

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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 _____ U00000095127
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 04/24/08-80157-005 138.75

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	M
NAME	HERSKOWITZ, JEROME TRUSTEE
STREET ADDRESS	132050 SO. DIXIE HWY, STE 940
CITY-ST-ZIP	CORAL GABLES, FL 33146
TITLE	M
NAME	HERSKOWITZ, BERNARD TRUSTEE
STREET ADDRESS	132050 SO. DIXIE HWY, STE 940
CITY-ST-ZIP	CORAL GABLES, FL 33146
TITLE	M
NAME	EASTON, EDWARD TRUSTEE
STREET ADDRESS	132050 SO. DIXIE HWY, STE 940
CITY-ST-ZIP	CORAL GABLES, FL 33146
TITLE	M
NAME	GREENWALD, ALLEN R TRUSTEE
STREET ADDRESS	132050 SO. DIXIE HWY, STE 940
CITY-ST-ZIP	CORAL GABLES, FL 33146
TITLE	M
NAME	SCHWARTZ, ERIC J TRUSTEE
STREET ADDRESS	132050 SO. DIXIE HWY, STE 940
CITY-ST-ZIP	CORAL GABLES, FL 33146
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Bernard Herskowitz 4-10-08

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

Bernard Herskowitz