

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2008 8:00 am
Secretary of State

03-14-2008 90200 049 ****50.00
04-11-2008 90179 040 ****88.75

DOCUMENT # L00000008500	
1. Entry Name YOUR RESORT ZJ, L.L.C.	

Principal Place of Business 7000 ENVIRON BLVD PHASE II BLDG 3, 523 FORT LAUDERDALE, FL 33319	Mailing Address 7000 ENVIRON BLVD PHASE II APT 623 FORT LAUDERDALE, FL 33319
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60022061



2. Principal Place of Business - No P.O. Box # 7400 RADICE CT Apt 409 Lauderhill FL 33319 Broward	3. Mailing Address 7400 Radice Ct Apt 409 Lauderhill FL 33319 Broward
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04232007 Chg-LLC CR2E083 (12/08)

4. FEI Number 65-1024781	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent YEHA, ZAKARIA 7000 ENVIRON BLVD PHASE II APT 623 FORT LAUDERDALE, FL 33319	7. Name and Address of New Registered Agent Name YEHA, ZAKARIA Street Address (P.O. Box Number is Not Acceptable) 7400 RADICE CT Apt 409 Lauderhill FL 33319
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I, 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 John V. Harvie DATE 3/5/08
Signature, typed or printed name of registered agent, and date if applicable. (NOTE: Registered Agent signature required when reappointing.)

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

Make check payable to
Florida Department of State

8. MANAGING MEMBERS/MANAGERS		9. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ZAKARIA, YEHA 7000 ENVIRON BLVD PHASE II APT 623 FORT LAUDERDALE, FL 33319	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT ZAKARIA YEHA 7400 RADICE CT LAUDERHILL FL 33319
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TS HARVIE, JOHN V 7000 ENVIRON BLVD PHASE II APT 623 FORT LAUDERDALE, FL 33319	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Treasurer, Secretary JOHN V. HARVIE 7400 RADICE CT Apt 409 LAUDERHILL FL 33319
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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 806, Florida Statutes.

SIGNATURE John V. Harvie DATE 3/5/08 954 673 3600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE