

2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90028 043 ****50.00

DOCUMENT # L00000009159

1. Entity Name
JJJ, LLC



Principal Place of Business
3925 WEST BOYNTON BEACH BLVD.
STE. 110
BOYNTON BEACH, FL 33436

Mailing Address
3925 WEST BOYNTON BEACH BLVD.
STE. 110
BOYNTON BEACH, FL 33436

20038358



04072005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1068359

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BAILIN, JOSHUA
3925 BOYNTON BEACH BLVD #110
BOYNTON BEACH, FL 33436

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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, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE D
NAME ARRASCUE, JOSE F
STREET ADDRESS 5503 S CONGRESS AVE #103
CITY-ST-ZIP ATLANTIS, FL 33462

TITLE MGR
NAME HALPERT, DAVID
STREET ADDRESS 5503 S CONGRESS AVE #110
CITY-ST-ZIP ATLANTIS, FL 33462

TITLE D
NAME BAILIN, JOSHUA
STREET ADDRESS 5503 S CONGRESS AVE #103
CITY-ST-ZIP ATLANTIS, FL 33462

TITLE D
NAME FARIOS, MARCO G
STREET ADDRESS 5503 S CONGRESS AVE
CITY-ST-ZIP ATLANTIS, FL 33462

TITLE D
NAME GUZMAN-RIVERA, JHON MD
STREET ADDRESS 5503 S CONGRESS AVE #103
CITY-ST-ZIP ATLANTIS, FL 33462

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Betty J. Verbal *betty J. Verbal, Admin/CEO* 4/12/05 561 740 2004025

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #