

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 27, 2006 08:00 AM
Secretary of State

DOCUMENT # L00000014759

1. Entity Name
 IJ INVESTMENT GROUP, LLC



Principal Place of Business
 7464 NW 163 TERR.
 HIALEAH, FL 33016

Mailing Address
 7964 NW 163 TERRACE
 HIALEAH, FL 33016

DO NOT WRITE IN THIS SPACE



01092006No Chg-LLC

CR2E083 (11/05)

| | |
|-----------------------------|-------------------------------|
| 4. FEI Number 65-1064364 | Applied For Not Applicable |
|-----------------------------|-------------------------------|

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

VARELA, JULIO
 7964 NW 163 TERRACE
 HIALEAH, FL 33016

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE _____

Filing Fee is \$50.00
Due by May 1, 2006

L000000403930
 02/06/06-80025-024 50.00

9. MANAGING MEMBERS/MANAGERS

| | |
|----------------|-----------------------|
| TITLE | MGR |
| NAME | GONZALEZ, INOCENCIO J |
| STREET ADDRESS | 16368 NW 86 COURT |
| CITY-ST-ZIP | MIAMI LAKES, FL 33016 |

| | |
|----------------|-----------------------|
| TITLE | MGR |
| NAME | VARELA, JULIO |
| STREET ADDRESS | 7964 NW 163 TERRACE |
| CITY-ST-ZIP | MIAMI LAKES, FL 33016 |

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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: _____

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

Date

Daytime Phone #

1-20-06 (786) 229-6977