

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000005095

FILED
Mar 31, 2006
Secretary of State

Entity Name: J.B.J. BUSINESS & SERVICES, L.L.C.

Current Principal Place of Business:

375 SOUTH ROYAL POINCIANA BLVD., STE 3A
MIAMI SPRING, FL 33166

New Principal Place of Business:

Current Mailing Address:

375 SOUTH ROYAL POINCIANA BLVD., STE 3A
MIAMI SPRING, FL 33166

New Mailing Address:

FEI Number: 65-1092601

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARILUZ LOPEZ DE ALCALA
375 SOUTH ROYAL POINCIANA BLVD., STE 3A
MIAMI SPRING, FL 33166 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ALCALA, BENIGNO JUNIOR
Address: 375 ROYAL POINCIANA 31
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: MGRM () Delete
Name: LOPEZ, MARILUZ
Address: 375 ROYAL POINCIANA 31
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: MGRM () Delete
Name: ALCALA, BENIGNO
Address: 375 ROYAL POINCIANA 31
City-St-Zip: MIAMI SPRINGS, FL 33166

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: MARILUZ LOPEZ DE ALCALA

MGR

03/31/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date