2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 12, 2007
Secretary of State

DOCUMENT# L01000008297

Entity Name: J & D INVESTMENTS I, L.L.C.

Current Principal Place of Business:

16401 N.W.58TH AVENUE
MIAMI LAKES, FL 33014

New Principal Place of Business:

Current Mailing Address:

16401 N.W.58TH AVENUE
MIAMI LAKES, FL 33014

New Mailing Address:

P. O. BOX 4944
MIAMI LAKES, FL 33014

FEI Number: 65-1108683 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CAPELETTI, JOE
16401 N.W.58TH AVENUE
MIAMI LAKES, FL 33014 US

Name and Address of New Registered Agent:

MEADOR, DOTTI C
16401 N.W.58TH AVENUE
MIAMI LAKES, FL 33014 US

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: DOTTI CAPELETTI MEADOR 06/12/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: CAPELETTTI, JOE
Address: 16401 NW 58TH AVE
City-St-Zip: HIALEAH, FL 33014

Title: MGRM ( ) Delete
Name: MEADOR, DOTTI C
Address: 16401 NW 58TH AVE
City-St-Zip: HIALEAH, FL 33014

ADDITIONS/CHANGES:

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 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: DOTTI CAPELETTI MEADOR MGRM 06/12/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date