


**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 27, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L01000021544</b> 1. Entity Name AHJTJV, LLC	
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Principal Place of Business 1255 N.W. 17TH AVE. DELRAY BEACH, FL 33483	Mailing Address 1255 N.W. 17TH AVE. DELRAY BEACH, FL 33483
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<b>DO NOT WRITE IN THIS SPACE</b>
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02252004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1159519	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  PAKRADOONI, J. MICHAEL 967 CYPRESS DRIVE DELRAY BEACH, FL 33483
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**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, 2004**

000000068644  
02/27/04-80050-001 \$0.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR PAKRADOONI, J. MICHAEL 967 CYPRESS DRIVE DELRAY BEACH, FL 33483
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR PAKRADOONI, THOMAS H 64 IVY MILLS ROAD GLEN MILLS, PA 19342
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
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)(f), 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:**  **J. Michael Pakradooni 2/25/04 (561)278-1937**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #