

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 01, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L01000021544**

1. Entity Name  
**AHJTV, LLC**



Principal Place of Business  
**1255 N.W. 17TH AVE.  
DELRAY BEACH, FL 33483**

Mailing Address  
**1255 N.W. 17TH AVE.  
DELRAY BEACH, FL 33483**



04262006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-1159519**

Applied For  
**Not Applicable**

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**PAKRADOONI, J. MICHAEL  
967 CYPRESS DRIVE  
DELRAY BEACH, FL 33483**

**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 reinstating)

DATE \_\_\_\_\_

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

**9. MANAGING MEMBERS/MANAGERS**

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

000000550403  
05/13/06-80060-002 50.00

**DO NOT WRITE  
IN THIS SPACE**

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.

**J. Michael Pakradooni 4/25/06 561-278-1937**

**SIGNATURE:** \_\_\_\_\_

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

Date

Daytime Phone #