2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000027002 1. Entity Name D.C.J., L.L.C.



Principal Place of Business

9762 87TH PLACE S BOYNTON BEACH, FL 33437

Mailing Address 9762 87TH PLACE S **BOYNTON BEACH, FL 33437**

FILED Jan 16, 2008 08:00 AN Secretary of State



01092008 No Chg-LLC

CR2E083 (12/07)

561-733-4620

5. C	artificate of Status Desired	5.00	Additional
1	6-1638944		Not Applicable
4. Fi	I Number		Applied For

6. Name and Address of Current Registered Agent

DUFFEY, BRIAN K ESQ. 7601 N. FEDERAL HWY., STE. 200 BOCA RATON, FL 33487

CITY-ST-ZIP

SIGNATURE:

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	e named entity submits this statement for the purpose of char tions of registered agent.	nging its registered office or registered agen	it, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reins	taung) DATE
	NOWIII FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS		,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PLAISTED, DOUGLAS 9762 87TH PLACE S BOYNTON BEACH, FL 33437		UQDOQO786707 01/17/08-80050-023 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			OO NOT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	·		
TITLE			

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