2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

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DOCUMENT # L03000003214

JENSEN NORTH ATLANTIC, LLC



Principal Place of Business

4434 NORTH BAY ROAD ABBEY BERKOWITZ MIAMI BEACH, FL 33140 Mailing Address

4434 NORTH BAY ROAD ABBEY BERKOWITZ MIAMI BEACH, FL 33140

FILED Apr 29, 2008 8:00 am Secretary of State

04-29-2008 90026 035 ***138.75

60031466



04232008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BERKOWITZ, ABBEY 4434 NORTH BAY ROAD MIAMI BEACH, FL 33140

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8. The above the obliga	e named entity submits this statement for the tions of registered agent.	e purpose of chan	ging its registered office or registered agent, or both, in the S	tate of Florida. I am familiar with, and accept
SIGNATURE.		-		
	Signature, typed or printed name of registered agent and	ппе и вррисвоје.	(NOTE: Registered Agent signature required when reinstating)	DATE
	E NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS	/MANAGERS		

TITLE **MGRM** NORTH ATLANTIC, INC. NAME STREET ADDRESS 4434 NORTH BAY ROAD CITY-ST-ZIP MIAMI BEACH, FL 33140 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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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 trystee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: #

SIGNATURE AND THE OR PRINTED NAME OF PIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

04-28-08

Daytime Phone #