

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000004219

Entity Name: AJH, LLC

FILED
Mar 20, 2009
Secretary of State

Current Principal Place of Business:

200 PARK CENTRAL BLVD. SOUTH
SUITE 5
POMPANO BEACH, FL 33064 US

New Principal Place of Business:

Current Mailing Address:

200 PARK CENTRAL BLVD. SOUTH
SUITE 5
POMPANO BEACH, FL 33064 US

New Mailing Address:

FEI Number: 05-0557145

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, DENNIS D ESQ.
C/O TRIPP SCOTT, P.A.
110 SE 6TH STREET, 15TH FLOOR
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GLICKMAN, MICHAEL J
Address: 1041 S.W. 21ST AVENUE
City-St-Zip: BOCA RATON, FL 33486 US

Title: MGRM () Delete
Name: HOWARD, THEA R CFO/ST
Address: 954 S.W. 21ST WAY
City-St-Zip: BOCA RATON, FL 33486 US

Title: MGRM () Delete
Name: HOWARD, MITCHELL J P
Address: 9065 EQUUS CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: THEA R. HOWARD

MGRM

03/20/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date