

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000010234

FILED
Feb 26, 2004
Secretary of State

Entity Name: TRIPLE J'S, LLC

Current Principal Place of Business:

930 NW 13 COURT
FT LAUDERDALE, FL 33311

New Principal Place of Business:

4153 SW 47 AVENUE STE 107
DAVIE, FL 33314

Current Mailing Address:

930 NW 13 COURT
FT LAUDERDALE, FL 33311

New Mailing Address:

4153 SW 47 AVENUE STE 107
DAVIE, FL 33314

FEI Number: 41-2085977

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, JASON A
930 NW 13 COURT
FT LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

SMITH, JASON A
4143 SW 47 AVENUE STE 107
DAVIE, FL 33314 US

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: JASON A SMITH

02/26/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: SMITH, JASON A
Address: 4143 SW 47 AVENUE STE 107
City-St-Zip: DAVIE, FL 33314

Title: MGR () Change (X) Addition
Name: WALKER, BARRINGTON
Address: 4143 SW 47 AVENUE STE 107
City-St-Zip: DAVIE, FL 33314

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JASON A SMITH

MGR

02/26/2004

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