2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000014753

1. Entity Name **B J INVESTMENTS, LLC**

Principal Place of Business

2222 COLONIAL RD.

FT. PIERCE, FL 34950

Mailing Address

2222 COLONIAL RD.

FT. PIERCE, FL 34950

FILED May 09, 2005 8:00 am Secretary of State

05-09-2005 90049 003 ****50.00

1401/034



01112005 No Chg-LLC

4. FEI Number Applied For Not Applicable 06-1691266 \$5.00 Additional 5. Certificate of Status Desired Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent DIBARTOLOMEO, GERALDA JR. 2222 COLONIAL RD.

TITLE NAME STREET ADDRESS CITY-ST-ZIP

FT. PIERCE, FL 34950

DO NOT WRITE IN THIS SPACE

the obligat	named entity submits this statement for the purpose of changions of registered agent.	ging its registered	d office or registered agent, or both, in the S	State of Florida. I am familiar with, and acce
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstalling)		DATE
	iling Fee is \$50.00 ue by May 1, 2005			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DIBARTOLOMEO, GERALD A 2222 COLONIAL RD. #200 FT. PIERCE, FL 34950			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Di BarTolumeo Barbara 2222 Culuntof Fol # 200			
NAME STREET ADDRESS CITY-ST-ZIP	PT. Pierce, F1.34950		DO NO	T WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS	SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				

11. I hereby certify that the information supplied with this filing does not qualify 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 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: Ruce Ray G. Di Bartolomes	1/14	105 772-461-883
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	Date	Daytime Phone #