2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 12, 2009
Secretary of State

DOCUMENT# L03000017763

Entity Name: CJS ASSOCIATES, L.L.C.,

Current Principal Place of Business:

6177 NW 90TH AVE.
PARKLAND, FL 33067

New Principal Place of Business:

Current Mailing Address:

6177 NW 90TH AVE.
PARKLAND, FL 33067

New Mailing Address:

FEI Number: 55-0831209 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

YEN, SHANGPYNG
6177 NW 90TH AVE.
PARKLAND, FL 33067 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: VP ( ) Delete
Name: LIN, JUI-CHIN
Address: 626 NW 159 LANE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGRM ( ) Delete
Name: TU, CHING-JEN
Address: 7150 NW 84TH AVE.
City-St-Zip: PARKLAND, FL 33067

Title: P ( ) Delete
Name: YEN, SHANGPYNG
Address: 6177 NW 90TH AVE.
City-St-Zip: PARKLAND, FL 33067

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: SHANGPYNG YEN P 04/12/2009

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