2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000024548

JES VENTURES LC



FILED Apr 07, 2008 08:00 A Secretary of State

Principal Place of Business

C/O JOSEPH E. SLEIMAN 2111 EAST MICHIGAN STREET, SUITE 200 ORLANDO, FL 32806

Mailing Address

C/O JOSEPH E. SLEIMAN 2111 EAST MICHIGAN STREET, SUITE 200 ORLANDO, FL 32806



03282008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number	Applied For			
26-5904130	Not Applicable			
5. Certificate of Status Desired	\$5.00 Additional Fee Required			

6. Name and Address of Current Registered Agent

SLEIMAN, JOSEPH E 2111 EAST MICHIGAN STREET, SUITE 200 ORLANDO, FL 32806

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named entity submits this statement for the purpose of chan tions of registered agent.	nging its registered	l office or	registere	d agent, or both	, in the State of Flo	rida. I am familiar	with, and accept
Singulura, lyned or crinted name of recistered agent and title if applicable.	(NOTE: Registered A	Agent slanstu	w belluper er	hen reinstating)		DATE	
NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75			•				
MANAGING MEMBERS/MANAGERS			٠,,,		1. Gast 1981, 188	184364.	er 355 g
MGRM		ír E					
SLEIMAN, JOSEPH E		•			• •		
2111 EAST MICHIGAN ST., SUITE 200		•	•	t-	•. •	٠,	*
ORLANDO, FL 32806					Hananns	284415	
	Signature, typed or printed name of registered agent and title if applicable. E NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS MGRM SLEIMAN, JOSEPH E 2111 EAST MICHIGAN ST., SUITE 200	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered / P. NOWI!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS MGRM SLEIMAN, JOSEPH E 2111 EAST MICHIGAN ST., SUITE 200	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature is now it.) E NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS MGRM SLEIMAN, JOSEPH E 2111 EAST MICHIGAN ST., SUITE 200	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required we now it.) E NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS MGRM SLEIMAN, JOSEPH E 2111 EAST MICHIGAN ST., SUITE 200	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) E NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS MGRM SLEIMAN, JOSEPH E 2111 EAST MICHIGAN ST., SUITE 200	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent alignature required when reinstating) E NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS MGRM SLEIMAN, JOSEPH E 2111 EAST MICHIGAN ST., SUITE 200 ORI ANDO FL 32806	Signature. Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) E NOWILL FEE IS \$138.75 / 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS MGRM SLEIMAN, JOSEPH E 2111 EAST MICHIGAN ST., SUITE 200

04/17/08-80043-008 138.75

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Unapter 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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.
minds adminy company or the received of the re

SIGNATURE: SIGNATURE A

4-3-08

TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE