## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000038117

Entity Name: J2NTERPRISES LLC

Address:

City-St-Zip:

45 WALL ST APT 1420

NEW YORK, NY 10005 US

FILED Jun 23, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1885 PALM COVE BLVD STE 308 DELRAY BEACH, FL 33445 **Current Mailing Address: New Mailing Address:** 1885 PALM COVE BLVD STE 308 DELRAY BEACH, FL 33445 FFI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COHEN & PALERA, LLC 955 SW 17TH AVE BLDG D DELRAY BEACH, FL 33445 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MATZA, JEREMY S Name: Name: Address: 1885 PALM COVE BLVD STE 308 Address: City-St-Zip: DELRAY BEACH, FL 33445 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: GITLITZ, JOSHUA Name: Address: PO BOX 1377 Address: City-St-Zip: ASPEN, CO 81612 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition MUFSON, BRETT Name: Name: 298 MULBERRY ST APT 5-0 Address: Address: City-St-Zip: NEW YORK, NY 10012 City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition Name: ROMEO, JAMES Name:

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.

Address:

City-St-Zip:

SIGNATURE: JEREMY MATZA MGMR 06/23/2009