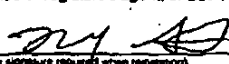
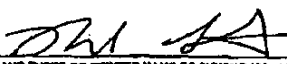


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Jun 09, 2004 8:00 am
Secretary of State

04-29-2004 90175 001 ***550.00

DOCUMENT # L03000040185					
1. Entity Name PROPERTY JA, LLC					
Principal Place of Business 1280 GULF BLVD. BELLEAIR SHORE FL 33786			Mailing Address 1280 GULF BLVD. BELLEAIR SHORE FL 33786		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
4. Name and Address of Current Registered Agent CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS RD #221E PALM BEACH GARDENS FL 33410				7. Name and Address of New Registered Agent Name RICHARD SURETTE Street Address (P.O. Box Number is Not Acceptable) 1280 GULF BLVD City Belleair Shore FL Zip Code 33786	
5. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE RICHARD SURETTE  DATE 4-20-04 Signatures, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when renewing)					
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2004					
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM RICHARD SURETTE 1280 GULF BLVD Belleair Shore		TITLE NAME STREET ADDRESS CITY-ST-ZIP	33786	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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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:  Rich Surette DATE 4/20/04 DAYTIME PHONE # 727-595-2748 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					

34008393



MOORE CR2E083 (11/03)