

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 22, 2005 8:00 am
Secretary of State


03-22-2005 90184 008 ****50.00

DOCUMENT # L03000041707
 1. Entity Name
 J. D. LIMITED LIABILITY COMPANY



Principal Place of Business Mailing Address
 2000 S DIXIE HWAY 2000 S DIXIE HWAY
 STE 100 STE 100
 MIAMI FL 33133 MIAMI FL 33133

DO NOT WRITE IN THIS SPACE



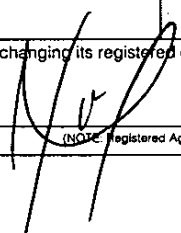
03112005No Chg-LLC CR2E083 (10/03)

4. FEI Number 20-0361829	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 RAY ABBASSI
 2000 S DIXIE HWAY
 STE 100
 MIAMI FL 33133

DO NOT WRITE IN THIS SPACE

8. 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:  DATE: 3/16/05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
 Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RAY ABBASSI 2000 S DIXIE HWAY STE 100 MIAMI FL 33133
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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:  RAY ABBASSI 3/16/05 305-856-5859

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #