

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000045684

Entity Name: JNFORENSICS, LC

**FILED**  
**Apr 29, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

2314 TRAVIS ROBERT AVENUE  
VALRICO, FL 33594

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 172454  
TAMPA, FL 33672

**New Mailing Address:**

FEI Number: 43-2036191

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NYMARK, DENNIS V  
110 SO. PEBBLE BEACH BLVD.  
SUN CITY CENTER, FL 33573 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: MGR ( ) Delete  
Name: NAVARRO, JOE  
Address: PO BOX 172454  
City-St-Zip: TAMPA, FL 33672

**ADDITIONS/CHANGES:**

Title: CEO (X) Change ( ) Addition  
Name: NAVARRO, JOE  
Address: PO BOX 172454  
City-St-Zip: TAMPA, FL 33672

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: JOE NAVARRO

CEO

04/29/2007

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