## 2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## **FILED** Mar 03, 2008 08:00 A **DOCUMENT # L03000046741** Secretary of State 1. Entity Name A.R.J.K. ENTERPRISES LLC Principal Place of Business Mailing Address 770 CLEARLAKE ROAD P.O. BOX 236921 SUITE 101 COCOA, FL 32923 COCOA, FL 32922 01042008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 27-0085983 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SMITH, OLIVER V JR. DO NOT WRITE 2467 KATHI KIM STREET COCOA, FL 32926 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent stansture required when reinstating) DATE U00000848606--FILE NOW!!! FEE 18 \$138.75 03/18/08-80036-003 138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS TITLE SMITH, OLIVER V JR. NAME STREET ADDRESS 2467 KATHI KIM ST CITY-ST-ZIP COCOA, FL 32926 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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.

GING MEMBER, OR AUTHORIZED REPRESENTATIVE