

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000018900

Entity Name: DJM INVESTMENTS, L.L.C.

FILED
Apr 01, 2009
Secretary of State

Current Principal Place of Business:

21403 NE 18TH PLACE
NORTH MIAMI BEACH, FL 33179 US

New Principal Place of Business:

20900 NE 30 AVE
SUITE 318
AVENTURA, FL 33180 US

Current Mailing Address:

21403 NE 18TH PLACE
NORTH MIAMI BEACH, FL 33179 US

New Mailing Address:

20900 NE 30 AVE
SUITE 318
AVENTURA, FL 33180 US

FEI Number: 20-2431363

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUIZ, MIGUEL
21403 NE 18TH PLACE
NORTH MIAMI BEACH, FL 33179 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: RUIZ, MIGUEL
Address: 21403 NE 18TH PLACE
City-St-Zip: NORTH MIAMI BEACH, FL 33179 US

Title: MGRM () Delete
Name: RUIZ, DEANY
Address: 10300 WEST BAY HARBOR DR. #5B
City-St-Zip: BAY HARBOR ISL., FL 33154 US

Title: MGRM () Delete
Name: RUIZ, JOAQUIN
Address: 1021 VIA LINTERNA
City-St-Zip: TUCSON, AZ 85718

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MIGUEL RUIZ

MGR

04/01/2009

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