

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000028812

Entity Name: SJM INVESTMENTS, LLC

FILED
Feb 29, 2008
Secretary of State

Current Principal Place of Business:

696 E. 52ND ST
HIALEAH, FL 33013

New Principal Place of Business:

Current Mailing Address:

696 E. 52ND ST
HIALEAH, FL 33013

New Mailing Address:

FEI Number: 20-1138360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENBERG, STEWART ESQ
11400 N. KENDALL DR, STE 400
MIAMI, FL 33176 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: CABRERA, JULIO A
Address: 696 EAST 52 STREET
City-St-Zip: HIALEAH, FL 33013

Title: MGR () Delete
Name: CABRERA, SUYIN
Address: 696 EAST 52 STREET
City-St-Zip: HIALEAH, FL 33013

Title: VS () Delete
Name: CABRERA, JULIO A
Address: 696 E 52 STREET
City-St-Zip: HIALEAH, FL 33013

Title: PT () Delete
Name: CABRERA, SUYIN
Address: 696 E 52 STREET
City-St-Zip: HIALEAH, FL 33013

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:

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: JULIO A CABRERA

MGR

02/29/2008

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