

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

\$50.00

**FILED**

**07 APR 16 AM 9:23**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



01152007 No Chg-LLC

CR2E083 (11/05)

07

**DOCUMENT # L04000036346**

1. Entity Name  
JAC 3009, LLC



Principal Place of Business  
3009 NW 75 AVENUE  
MIAMI, FL 33122

Mailing Address  
3009 NW 75 AVENUE  
MIAMI, FL 33122

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-1129543

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent -

CLARAMONTE, ALBERT  
3009 NW 75 AVENUE  
MIAMI, FL 33122

**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

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, 2007**

800097950578  
04/23/07--01005--009 \*\*850.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGR
NAME	CLARAMONTE, ALBERT M PRES
STREET ADDRESS	3009 NW 75 AVENUE
CITY-ST-ZIP	MIAMI, FL 33122
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

413107

Date

305-372-9683

Daytime Phone #