


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 17, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L04000037901</b> 1. Entity Name E & J CONSULTING LLC	
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Principal Place of Business 5167 DERBY FOREST LANE JACKSONVILLE, FL 32258	Mailing Address 559 LEE COUNTY RD. 2039 NOTASULGA, AL 36866
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**DO NOT WRITE IN THIS SPACE**



01082007 No Chg-LLC



CR2E083 (11/05)

4. FEI Number 04-3661539	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  CHAKI, EVAN 5167 DERBY FOREST LANE JACKSONVILLE, FL 32258
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**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  (NOTE: Registered Agent signature required when reinstating) DATE 

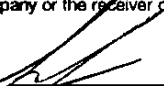
Filing Fee is \$50.00  
Due by May 1, 2007

U00000589045  
01/17/07-80096-018 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CHAKI, EVAN 5167 DERBY FOREST LANE JACKSONVILLE, FL 32228
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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:  1/10/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #