2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000051706

Entity Name: J.B. HOSPITALITY, L.L.C.

ARTESIA, CA 90701 US

City-St-Zip:

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 26508 U.S. HIGHWAY 19 NORTH CLEARWATER, FL 33761 **Current Mailing Address: New Mailing Address:** 26508 U.S. HIGHWAY 19 NORTH CLEARWATER, FL 33761 FEI Number: 20-1450335 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PATEL, PRAVIN 26508 Ú.S. HIGHWAY 19 NORTH CLEARWATER, FL 33761 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: ADDITIONS/CHANGES: Title: () Change () Addition MGRM () Delete PATEL, PRAVIN Name: Name: 26508 U.S. HIGHWAY 19 NORTH Address: Address: City-St-Zip: CLEARWATER, FL 33761 City-St-Zip: Title: MGMR () Delete Title: () Change () Addition PATEL, CHANDRAKANT M Name: Name: Address: 11710 E 186TH ST Address: City-St-Zip: ARTESIA, CA 90701 US City-St-Zip: Title: MGMR () Delete Title: () Change () Addition SHAH, JAYKUMAR Name: Name: Address: 536 N.ALTA VISTA Address: City-St-Zip: MONROVIA, CA 91016 US City-St-Zip: Title: MGMR () Delete Title: () Change () Addition Name: MORARI, BHARAT M Name: Address: 11710 E 186TH ST Address: City-St-Zip: ARTESIA, CA 90701 US City-St-Zip: Title: MGMR () Delete Title: () Change () Addition SHAH, DILIP Name: Name: 1130 VISTA LOMAS LANE Address: Address: City-St-Zip: CORONA, CA 91720 US City-St-Zip: Title: MGMR () Delete Title: () Change () Addition MORARI, NEÈLA B Name: Name: Address: 11710 E 186TH ST Address:

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.

City-St-Zip:

SIGNATURE: PRAVIN PATEL MGRM 04/29/2009