## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # L04000055345**

1. Entity Name
J.P.E. PROPERTY INVESTMENTS, LLC



Mailing Address

719 N.E. 9TH AVENUE BOYNTON BEACH, FL 33436

Principal Place of Business

719 N.E. 9TH AVENUE BOYNTON BEACH, FL 33436 FILED Feb 02, 2007 08:00 AM Secretary of State



01282007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number	•	Applied For
20-1415643		Not Applicable
5. Certificate of Status Desired		\$5.00 Additional

6. Name and Address of Current Registered Agent

OSORTO, JULIO 719 N.E. 9TH AVENUE BOYNTON BEACH, FL 33436

SIGNATURE: \

SIGNATURE AND TYPED

## 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. 1 am familiar with, and accept the obligations of registered agent.				
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NDTE: Registered Agent signature required when reinstating)	DATE	
Filing Fee Is \$50.00 Due by May 1, 2007			U00000619159 02/08/07-80060-004 50.00	
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR OSORTO, JULIO 719 N.E. 9TH AVENUE BOYNTON BEACH, FL 33435			
THEE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby indicated limited tia	certify that the information supplied with this filing does not on this report is true and accurate and that my signature subility company or the receiver of trustee empowered to exe	qualify for the exemptions contained in Chapter hall have the same legal effect as if made under oute this report as required by Chapter 608, Floring the content of the co	119, Florida Statutes. I further certify that the information oath; that I am a managing member or manager of the ida Statutes.	