

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000057427

Entity Name: JACAMILIN, LLC

FILED
Apr 26, 2009
Secretary of State

Current Principal Place of Business:

8353 W SUNRISE BLVD
PLANTATION, FL 33322

New Principal Place of Business:

Current Mailing Address:

8353 W SUNRISE BLVD
PLANTATION, FL 33322

New Mailing Address:

3964 E. HIBISCUS ST
WESTON, FL 33332

FEI Number: 20-1657737

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORIEGA, ELBA L
8353 W SUNRISE BLVD
PLANTATION, FL 33322 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: NORIEGA, ELBA L PR
Address: 8353 W SUNRISE BLVD
City-St-Zip: PLANTATION, FL 33322

Title: MGR () Delete
Name: NORIEGA, JAIRO VP
Address: 8353 W SUNRISE BLVD
City-St-Zip: PLANTATION, FL 33322

ADDITIONS/CHANGES:

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: JN

VP

04/26/2009

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