2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000065231

Entity Name: K&J INVESTMENT HOLDINGS, LLC

FILED Apr 16, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

914 NORTH FEDERAL HIGHWAY 200 S ANDREWS AVE

FORT LAUDERDALE, FL 33304 US 5D

FORT LAUDERDALE, FL 33301 US

Current Mailing Address: New Mailing Address:

914 NORTH FEDERAL HIGHWAY 200 S ANDREWS AVE

FORT LAUDERDALE, FL 33304 US

FORT LAUDERDALE, FL 33301 US

FEI Number: 20-1595837 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:

TAYLOR, DANIEL E ESQ STROCHAK, JASON C/O TRIPP SCOTT, P.A. 200 S ANDREWS AVE

110 SE 6TH STREET, 15TH FLOOR 5D FORT LAUDERDALE, FL 33301 US FT LAUDERDALE, FL 33301 US

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: JASON STROCHAK 04/16/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 STROCHAK, JASON
 Name:

 Address:
 914 NORTH FEDERAL HIGHWAY
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33304 US
 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

Name:STROCHAK, KENName:Address:914 NORTH FEDERAL HIGHWAYAddress:City-St-Zip:FORT LAUDERDALE, FL 33304 USCity-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JASON STROCHAK MGR 04/16/2007