

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 18, 2008 8:00 am
Secretary of State

04-18-2008 90152 020 ***138.75

DOCUMENT # L04000082009

1. Entity Name

J AND Z ENTERPRISE, LLC



Principal Place of Business

9702 GLEN POINTE DRIVE
RIVERVIEW, FL 33569

Mailing Address

9702 GLEN POINTE DRIVE
RIVERVIEW, FL 33569

50004481



03162008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number

06-1735149

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME ZEIGLER, GEORGE
STREET ADDRESS 9702 GLEN POINTE DRIVE
CITY-ST-ZIP RIVERVIEW, FL 33569

TITLE MGR
NAME ZEIGLER, JACQUELINE
STREET ADDRESS 9702 GLEN POINTE DRIVE
CITY-ST-ZIP RIVERVIEW, FL 33569

TITLE S
NAME ZEIGLER, JACQUELINE
STREET ADDRESS 9702 GLEN POINTE DRIVE
CITY-ST-ZIP RIVERVIEW, FL 33569

TITLE T
NAME ZEIGLER, GEORGE
STREET ADDRESS 9702 GLEN POINTE DRIVE
CITY-ST-ZIP RIVERVIEW, FL 33569

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

George R. Zeigler **GEORGE R. ZEIGLER** 3/24/08 8136711685