## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

**DOCUMENT # L04000083758** 

1. Entity Name THREE J'S HOLDING, LLC

FILED Apr 21, 2008 08:00 A Secretary of State

Principal Place of Business

1138 S.W. 1ST WAY DEERFIELD BEACH, FL 33441 Mailing Address

1138 S.W. 1ST WAY

DEERFIELD BEACH, FL 33441



04182008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FILINGS, INC. 3732 N.W. 16TH STREET FT. LAUDERDALE, FL 33311-4132

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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 NAME STREET ADDRESS CITY-ST-ZIP	MGRM PILATO, MARIO 1138 S.W. 1ST WAY	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DEERFIELD BEACH, FL 33441  MGRM PILATO, RANDI 1138 S.W. 1ST WAY DEERFIELD BEACH, FL 33441	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DECANDIA, VINCENT 1138 S.W. 1ST WAY DEERFIELD BEACH, FL 33441	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS		

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11. I hereby certify that the information supplied with this filling 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 true see empowered to execute this report as required by Chapter 608, Florida Statutes.

954-

**SIGNATURE:** 

CITY-ST-ZIP

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

4-18-08

570-8773

Daytime Phone #