

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000086617

Entity Name: W.J.J. INVESTMENTS, LLC

FILED
Mar 08, 2005
Secretary of State

Current Principal Place of Business:

2027 SHERMAN STREET
HOLLYWOOD, FL 33020 US

New Principal Place of Business:

Current Mailing Address:

2027 SHERMAN STREET
HOLLYWOOD, FL 33020 US

New Mailing Address:

FEI Number: 84-1671366

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRASECKER, WENDY
15100 SW 16 STREET
PEMBROKE PINES, FL 33027 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/MEMBERS:

Title: MGRM () Delete
Name: BRASECKER, WENDY
Address: 15100 SW 16 STREET
City-St-Zip: PEMBROKE PINES, FL 33027 US

Title: MGRM () Delete
Name: COHEN, JEROME
Address: 1650 SW 148 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33027 US

Title: MGRM () Delete
Name: KELLER, JOHNATHAN
Address: 4919 TRADEWINDS TERRACE
City-St-Zip: FT. LAUDERDALE, FL 33312 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: KELLER, JOHNATHAN
Address: 4919 TRADEWINDS TERRACE
City-St-Zip: FT. LAUDERDALE, FL 33312 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WENDY BRASECKER

MGRM

03/08/2005

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