## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000090958

S.L.J. INVESTMENT, LLC



Principal Place of Business

275 WEST 25TH STREET HIALEAH, FL 33010

Mailing Address

275 WEST 25TH STREET HIALEAH, FL 33010

**FILED** Apr 30, 2007 08:00 AM Secretary of State



04112007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number	 Applied For
11-3736658	Not Applicabl
5. Certificate of Status Desired	\$5.00 Additional

6. Name and Address of Current Registered Agent

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

LOPEZ, LUIS 275 WEST 25TH STREET HIALEAH, FL 33010

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8. 7	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
t	the obligations of registered agent.	
	NATURE .	

(NOTE: Registered Agent signature required when reinstating)

Filing Fee Is \$50.00 Due by May 1, 2007

9	MANAGING MEMBERS/MANAGERS							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LOPEZ, LUIS 15782 NW 79TH STREET MIAMI LAKES, FL 33016							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LOPEZ, JORGE L 15782 NW 79TH STREET MIAMI LAKES, FL 33016							
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGRM LOPEZ, SARA 15782 NW 79TH STREET MIAMI LAKES, FL 33016							
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-SI-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP								

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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 trystee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:	S	l	G	١	l	Α	T	U	Į	R	E	:	
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BIGNATURE AND TYPED O

NAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #