

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000007865

Entity Name: JJAN, LLC

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

2900 N. GLADES CIRCLE
SUITE 1400
WESTON, FL 33327

New Principal Place of Business:

Current Mailing Address:

2900 N. GLADES CIRCLE
SUITE 1400
WESTON, FL 33327

New Mailing Address:

FEI Number: 57-1217596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROMANELLO PROFESSIONAL ASSOCIATION
11555 HERON BAY BOULEVARD
SUITE 200
CORAL SPRINGS, FL 33076 US

Name and Address of New Registered Agent:

ROMANELLO PROFESSIONAL ASSOCIATION
1560 SAWGRASS CORPORATE PARKWAY
FOURTH FLOOR
SUNRISE, FL 33323 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: STEVEN J ROMANELLO

04/30/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LIEBMAN, JOEL
Address: 240 FOREST DRIVE, J
City-St-Zip: JERICO, NY 11753

Title: MGRM () Delete
Name: LIEBMAN, JENNIFER
Address: 240 FOREST DRIVE, J
City-St-Zip: JERICO, NY 11753

Title: MGRM () Delete
Name: LIEBMAN, ADAM
Address: 240 FOREST DRIVE, J
City-St-Zip: JERICO, NY 11753

Title: MGRM () Delete
Name: LIEBMAN, NICOLE
Address: 240 FOREST DRIVE, J
City-St-Zip: JERICO, NY 11753

ADDITIONS/CHANGES:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: JOEL LIEBMAN

MGRM

04/30/2007

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