

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000013933

Entity Name: J2B INVESTMENT GROUP, LLC

FILED  
Apr 20, 2007  
Secretary of State

**Current Principal Place of Business:**

5571 SE FEDERAL HWY  
STUART, FL 34997

**New Principal Place of Business:**

**Current Mailing Address:**

2 KNOWLES ROAD  
STUART, FL 34996

**New Mailing Address:**

FEI Number: 20-2235472

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STEWART, ADDYS  
2 KNOWLES ROAD  
STUART, FL 34996 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/MANAGERS:**

Title: MGR ( ) Delete  
Name: J3AT HOLDING, INC.,  
Address: 2 KNOWLES ROAD  
City-St-Zip: STUART, FL 34996

Title: MGRM ( ) Delete  
Name: JACC ENTERPRISES, LL, C.  
Address: 2222 COLONIAL ROAD, SUITE 200  
City-St-Zip: FORT PIERCE, FL 34950

Title: MGRM ( ) Delete  
Name: HIGGS, WILLIAM  
Address: 4222 BUCHANAN STREET  
City-St-Zip: HOLLYWOOD, FL 33021

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: ADDYS STEWART

MGR

04/20/2007

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