2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000023548

City-St-Zip:

CORAL GABLES, FL 33134

Entity Name: JAR ENTERPRISES, LLC

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5295 NW 163 ST MIAMI, FL 33014 **Current Mailing Address: New Mailing Address: 5340 NW 163RD STREET** MIAMI, FL 33014 FEI Number: 20-2445602 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MORALES, ROBERTO 5295 NW 163 ST MIAMI, FL 33014 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete JOSE NICHOLAS MENDOZA Name: Name: Address: 2100 PONCE DE LEON BOULEVARD, SUITE 600 Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: MORALES, ROBERTO Name: Address: 2100 PONCE DE LEON BOULEVARD, SUITE 600 Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition RODRIGUEZ, ARTURO Name: Name: 2100 PONCE DE LEON BOULEVARD, SUITE 600 Address: Address:

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.

City-St-Zip:

SIGNATURE: ROBERTO MORALES CEO 04/24/2009