

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jul 07, 2008  
Secretary of State**

DOCUMENT# L05000025152

Entity Name: HJCFC INVESTMENTS, LLC

**Current Principal Place of Business:**

720 SANTURCE AVENUE  
CORAL GABLES, FL 33143

**New Principal Place of Business:**

**Current Mailing Address:**

720 SANTURCE AVENUE  
CORAL GABLES, FL 33143

**New Mailing Address:**

FEI Number: 20-2478652      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

BOHATCH, JOHN S ESQ  
7301 SOUTHWEST 57TH COURT  
SUITE 560  
SOUTH MIAMI, FL 33143 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: CANDELA, HILARY J TRUSTEE  
Address: 720 SANTURCE AVENUE  
City-St-Zip: CORAL GABLES, FL 33143

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

Title: MGRM ( ) Delete  
Name: CANDELA, CALENE F TRUSTEE  
Address: 720 SANTURCE AVENUE  
City-St-Zip: CORAL GABLES, FL 33143

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: HILARY J CANDELA

MGRM

07/07/2008

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