

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000038426

1. Entity Name
FLORIDA JERSEY GROUP, LLC



Principal Place of Business
1462 WEST 84 STREET
HIALEAH, FL 33014

Mailing Address
1462 WEST 84 STREET
HIALEAH, FL 33014

FILED

2008 APR 11 PM 3:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03262008 No Chg-LLC

CR2E083 (12/07)

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4. FEI Number
20-2790082

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CAMPOS, BERNARDO
1462 WEST 84 STREET
HIALEAH, FL 33014

**DO NOT WRITE
IN THIS SPACE**

8. 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 the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

300123236863
04/14/08--01010--025 **200.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	CAMPOS, BERNARDO
STREET ADDRESS	1462 WEST 84 STREET
CITY-ST-ZIP	HIALEAH, FL 33014
TITLE	MGRM
NAME	PADRON, WILLIAM
STREET ADDRESS	1462 WEST 84 STREET
CITY-ST-ZIP	HIALEAH, FL 33014
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE:

Bernardo Campos

Bernardo Campos

3/25/08

(305) 557-7903

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #