

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 02, 2007 8:00 am
Secretary of State

03-20-2007 90146 019 ****50.00

3/2

DOCUMENT # L05000054897

1. Entity Name
J & B PARTNERS, LLC



Principal Place of Business
**4659 S.W. 72ND AVENUE
MIAMI, FL 33155**

Mailing Address
**4659 S.W. 72ND AVENUE
MIAMI, FL 33155**

30003815



03072007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3007359

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**EGLIN, BEN
4659 S.W. 72ND AVENUE
MIAMI, FL 33155**

**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)

3-9-07

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**MGRM
BLAU, JAY
1285 - 15TH STREET, PH A
FORT LEE, NY 07024**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**MGRM
EGLIN, BEN
4659 S.W. 72ND AVENUE
MIAMI, FL 33155**

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CITY- ST- ZIP

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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 606, Florida Statutes.

SIGNATURE:

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

Date

Daytime Phone #

BERTMIN BLAU 3-30-07 305665-2161