


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90024 037 ***138.75

DOCUMENT # L05000058883	
1. Entity Name SJK VENTURES, LLC.	

Principal Place of Business 1844 N NOB HILL ROAD 316 PLANTATION, FL 33322	Mailing Address 10545 NW 10 ST PLANTATION, FL 33322
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2. Principal Place of Business - No P.O. Box # 10545 NW 10 ST	3. Mailing Address Suite, Apt. #, etc.
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City & State Plantation, FL	City & State
Zip 33322	Country Broward

04302008 Chg-LLC CR2E083 (12/06)

4. FEI Number 20-3009101	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent BRACKNEY, TERRY J 1844 N NOB HILL ROAD 316 PLANTATION, FL 33322	
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7. Name and Address of New Registered Agent -	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
10545 NW 10 St.	
City Plantation	FL Zip Code 33322

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BRACKNEY, TERRY J 1844 N NOB HILL ROAD APT-316 PLANTATION, FL 33322 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	10545 NW 10 St. Plantation, FL 33322 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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: Terry Brackney **4-30-08** **954-599-7530**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #