2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000060118

Entity Name: J&B CAPITAL MANAGEMENT, LLC.

3705 WELBORNE LANE

FLOWER MOUND, TX 75022 US

Address:

City-St-Zip:

FILED Mar 17, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
224 DATU 1112	IRA				2720 S OCEAN BLV 216	D		
	LM BEACH, FL	33401	US		PALM BEACH, FL 3	3480	US	
Current Mailing Address:					New Mailing Address:			
224 DATU	IRA				2720 S OCEAN BLV	D		
1112 WEST PA	LM BEACH, FL	33401	US		216 PALM BEACH, FL 3	3480	US	
FEI Number	: 05-0624611	FEI Numb	er Applied For ()	FEI Nun	nber Not Applicable ()	С	ertificate of Status Desired ()	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:			
216	MARY A CEAN BLVD ACH, FL 33480	US						
	e named entity s e of Florida.	ubmits this	s statement for the	purpose o	f changing its register	ed offic	ce or registered agent, or both	
SIGNATUI	RE:							
	Electroni	c Signatur	e of Registered Ag	ent			Date	
MANAGING MEMBERS/MANAGERS:					ADDITIONS/CHANGES:			
Title: Name: Address: City-St-Zip:	MGR () PERSON, JOHN 2720 S OCEAN I PALM BEACH, F	BLVD #216	;		Title: Name: Address: City-St-Zip:	() Cł	nange () Addition	
Title: Name: Address: City-St-Zip:	MGR () PERSON, MARY 2720 S OCEAN I PALM BEACH, F	BLVD #216	3		Title: Name: Address: City-St-Zip:	() Ch	nange ()Addition	
Title: Name: Address: City-St-Zip:	MGR () HEADDING, MIL 3705 WELBORN FLOWER MOUN	IE LANE	2 US		Title: Name: Address: City-St-Zip:	() Cł	nange ()Addition	
Title: Name:	MGR () HEADDING, PHY	Delete ′LLIS D			Title: Name:	() Cł	nange()Addition	

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.

Address:

City-St-Zip:

SIGNATURE: MARY PERSON MGR 03/17/2008