2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000072959

1. Entity Name
SSJ, LLC

Principal Place of Business	Mailing Address
8867 MONTEGUE TERRACE	8867 MONTEGUE TERRACE
BROOKLYN PARK, MN 55443	BROOKLYN PARK, MN 55443

DO NOT WRITE IN THIS SPACE

01142007No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
NOT APPLICABLE	Not Applicable

5. Certificate of Status Desired ☒ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

MCNAMARA, JOHN P
1251 PALM STREET
CLEARWATER, FL 33755

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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

Filing Fee is $50.00
Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS	
TITLE	MGRM	
NAME	MCNAMARA, JOHN P	
STREET ADDRESS	8867 MONTEGUE TERRACE	
CITY-ST-ZIP	BROOKLYN PARK, MN 55443	
TITLE	MGRM	
NAME	MCNAMARA, STEPHANIE	
STREET ADDRESS	8867 MONTEGUE TERRACE	
CITY-ST-ZIP	BROOKLYN PARK, MN 55443	
TITLE		
NAME		
STREET ADDRESS		
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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: _John P. M'Namara_   _1-14-07_   (612)533-8545

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #