## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **DOCUMENT # L05000087677**

1. Entity Name

JESSE ENTERPRISES, LLC



Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

7582 WEST SAND LAKE ROAD ORLANDO, FL 32819

7582 WEST SAND LAKE ROAD ORLANDO, FL 32819

## **FILED** Feb 11, 2008 08:00 Al Secretary of State



01082008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-4788698 5. Certificate of Status Desired

\$5.00 Additional Fee Required

Applied For Not Applicable

6. Name and Address of Current Registered Agent

8. The above	T SAND LAKE ROAD 0, FL 32819  named entity submits this statement for the purpose of changing its register	DO NO IN THE	T WRITE S SPACE
the obligations of registered agent.			
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Register	red Agent signature required when reinstating)	DATE
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
TITLE	MGRM		
NAME	MAALI, BASSEL		
STREET ADDRESS	7582 WEST SAND LAKE ROAD	To be a first the second of the second	
CITY-ST-ZIP	ORLANDO, FL 32819	- Kir China Com sea Spiragalite	ાનું કરિકો) હુંક્ષુનું કે <sup>મુ</sup> લો કર્ણણોર્ગિકોના છે.
TITLE NAME		Chief Carley or B. Jakob S. Jak	U00000823121 The F
STREET ADDRESS		150 (150 ) (150	20/08-80026-005 138.75
CITY-ST-ZIP			A Company of the Comp
TITLE			
NAME		A Commence of the commence of the	of John Spirit
STREET ADDRESS		DO NO	TWRITE
CITY-ST-ZIP		二星 - 그 그 그 가지 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그	d ( ~ (
TITLE		I N THIS	SSPACE
NAME STREET ADDRESS			
CITY-ST-ZIP		The state of the s	Set The set is the set of the set
TITLE			and form and spirit spirit the second
NAME		and his first on the time to the first	
STREET ADDRESS			
CITY-ST-ZIP		The state of the s	ger operation of the control of the
TITLE		Constitution of the contract o	
NAME			
STREET ADDRESS CITY-ST-ZIP		The second secon	Burgara Santa Cara and Burgara
OTT TOTAL		_ <b>_</b>	さ りっか アンマン あんね さい

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:

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