2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

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Entity Name: JDNK ENTERPRISES, LLC

Current Principal Place of Business:

880 N. TOWN AND RIVER DRIVE
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

880 N. TOWN AND RIVER DRIVE
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 20-3490984 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DRAULANS, DIMITRI MANAGER
880 N. TOWN AND RIVER DRIVE
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MR ( ) Delete
Name: DRAULANS, DIMITRI C MANAGER
Address: 880 N TOWN AND RIVER DR
City-St-Zip: FORT MYERS, FL 33919 US

Title: MRS ( ) Delete
Name: DRAULANS, JULIE ELIZABET P MANAGER
Address: 880 N TOWN AND RIVER DR
City-St-Zip: FORT MYERS, FL 33919 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: DIMITRI DRAULANS MR 04/24/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date