

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000102112

Entity Name: JAKOB II LLC

**FILED**  
**Apr 25, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

4109 NORTH FEDERAL HIGHWAY  
FORT LAUDERDALE, FL 33308

**New Principal Place of Business:**

**Current Mailing Address:**

4109 NORTH FEDERAL HIGHWAY  
FORT LAUDERDALE, FL 33308

**New Mailing Address:**

FEI Number: 19-3445267

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FOWLER WHITE BOGGS BANKER P.A.  
5811 PELICAN BAY BOULEVARD, SUITE 600  
NAPLES, FL 34108 US

**Name and Address of New Registered Agent:**

STEIN, JOEL  
4109 N FEDERAL HWY  
FORT LAUDERDALE, FL 33308 US

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: JOEL STEIN

04/25/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: JAKOB HOLDINGS LLC,  
Address: 4109 NORTH FEDERAL HIGHWAY  
City-St-Zip: FORT LAUDERDALE, FL 33308

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JAKOB HOLDINGS LLC

MGR

04/25/2006

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