## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000106270

1. Entity Name

J & L MARITIME SERVICES, LLC



FILED Jan 09, 2008 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

305 NORTH 12TH STREET FLAGLER BEACH, FL 32136

P.O. BOX 2099

FLAGLER BEACH, FL 32136-2099



01072008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

KANIA, JAMES N 305 NORTH 12TH STREET FLAGLER BEACH, FL 32136

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the obligations of registered agent.		
SIGNATURE_	Signiture, typed or printed name of registered agent and title of applicable	(NOTE: Registered Agent signature required when reinstating)  DATE
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75  U00000776857 01/09/08-80041-008 143.75		
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KANIA, JAMES N P.O. BOX 2099 FLAGLER BEACH, FL 321362099	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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.		

TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER. OR AUTHORIZED REPRESENTATIVE

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