## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L05000111328

1. Entity Name
J & J INVESTMENTS, LLC



## **FILED** Jul 05, 2006 8:00 am Secretary of State 07-05-2006 90105 001 \*\*\*\*55.00

Zip Country Zip Country 5. Country 5. Country 5. Country 5. Confilicate of Status Desired 5. St.00 Auditis Fee Required Agent 7. Name and Address of New Registered Agent Name  PLANT, JESSE B 6361 E. 3RD AVE. HIALEAH, FL 33013  8. The above named entity submits this statement for the purpose of Changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, an the obligations of registered agent.  SIGNATURE Symbol from or impassed upon and life if applicate.  Filling Fee is \$50.00  Difference of the purpose of Changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, an the obligations of registered agent.  SIGNATURE Symbol from or impassed upon and life if applicate.  Filling Fee is \$50.00  Difference or registered agent, or both, in the State of Florida. I am familiar with, an the obligations of registered agent, or both, in the State of Florida. I am familiar with, an the obligations of registered agent, or both, in the State of Florida. I am familiar with, an the obligations of registered agent, or both, in the State of Florida. I am familiar with, an familiar with, and the obligations of registered agent, or both, in the State of Florida. I am familiar with, an familiar with, an familiar with, and familiar with, a								
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City & State  Country  Special Country  FLANT, ISSE B State I SRD AVE HIALEAH, FL 33013  City  FL Zip Code  8. The above named entity submits this statement for the purpose of t	2. Principal F	Place of Business	3. Mailing Address					
City & State    City & State	Suite, Apt.	. #, etc.	Suite, Apt. #, etc.		06282006	Ch- 11 C	CD2C022 (44/05)	
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8. Name and Address of Current Registered Agent PLANT, JESSE B 6361 E. 3RD AVE. HIALEAH, FL 33013  City  City  City  City  City  FL  Zip Code  8. The above named entity submits this statement for the purpose of Changing its registered agent, or both, in the State of Florica. I am familiar with, an the obligations of registered agent.  SIGNATURE  FITTING Foe is \$50.00  Dise by September 6, 2006  Make check payable to Florida Department of State  9. MANAGING MEMBERS/MANAGETS  10. ADDITIONS/CHANGES  CITY-SI-2P  HIALEAH, FL 33013  Make check payable to Florida Department of State  9. MANAGING MEMBERS/MANAGETS  10. ADDITIONS/CHANGES  CITY-SI-2P  HIALEAH, FL 33013  ITILE  MAKE  SIREI ADDRESS  CITY-SI-2P  HIALEAH, FL 33013  TITLE  MAKE  SIREI ADDRESS  CITY-SI-2P	Zip	Country	Zip	Country	5 Cortifica			ot Applicable ditional
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Street Address (P.O. Box Number is Not Acceptable)    City   FL   Zip Code		6. Name and Address of Current	Registered Agent	Name	/. Name a	Id Address of New Ki	egistered Agent	
E. 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, an the Obligations of registered agent.  SIGNATURE  Signature frond or private famous or registered agent and the faugulates.  (NOTE Registered Agent syntax registered agent, or both, in the State of Florida. I am familiar with, an the Obligations of registered agent.  SIGNATURE  Filling Fee is \$50.00  Make check payable to Florida Department of State  9. MANAGING MEMBERS / MANAGERS  10. ADDITIONS / CHANGES  ITILE  MAR  PLANT, JESSE B  6361 E. 3 RD AVE.  ITILE  MARR  MARE  HALEAH, FL 33013  TITLE  MARR  HOBBS, JONATHAN ©  SIREH ADDRESS  CITY-ST-2P  HALEAH, FL 33013  TITLE  MARE  SIREH ADDRESS  CITY-ST-2P  TITLE  MARE  SIREH	6361 E. 3RD AVE.			Street Ac	ddress (P.O. Box Num	ber is Not Acceptable	)	
B. The above named entity submits this statement for the purpose of Changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, an the obligations of registered agent.  SIGNATURE  SUBMIT Flow or critical owned never of registered agent and tool of a system.  Filling Fee Is \$50.00  Disc by September 6, 2006  Make check payable to Florida Department of State  9. MANAGING MEMBERS/MANAGERS  TITLE  MARE  NAME  SIRET ADDRESS  CITY-ST-2P  TITLE  MARE  MARE  SIRET ADDRESS  CITY-ST-2P  TITLE  NAME  SIRET ADDRESS  CITY-ST-2P  TITLE  Change	nialean,	, FL 33013						
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Syntact Frond or printed name of regulared agent and this if applicable. (NOTE: Registered Agent signature required when reinstating)  Till Broot is \$50.00  Due by September 6, 2006  Make check payable to Florida Department of State  10.	the obliga	tions of registered agent.		000	_		- 20 2	/
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11. I hereby certify that the information supplies 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 justee empowered to execute this report as required by Chapter 608, Florida Statutes.