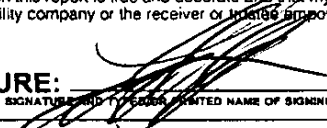


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jun 04, 2007 8:00 am**  
**Secretary of State**

05-04-2007 90305 029 \*\*\*\*50.00

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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                       |                                                                                                                                                                                           |                                                                                                                                            |
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| DOCUMENT # L05000111466                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                       |                                                                                                          |                                                                                                                                            |
| 1. Entity Name<br>EJ INVESTMENT GROUP, LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                       |                                                                                                                                                                                           |                                                                                                                                            |
| Principal Place of Business<br><del>4066 EVANS AVE</del><br><del>SUITE 23</del><br>FORT MYERS, FL 33901                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                       | Mailing Address<br><del>4066 EVANS AVE</del><br><del>SUITE 23</del><br>FORT MYERS, FL 33901                                                                                               |                                                                                                                                            |
| 2. Principal Place of Business - No P.O. Box #<br>2733 Oak Ridge Ct.<br>Suite, Apt. #, etc.<br>105                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                       | 3. Mailing Address<br>Same as principal<br>Suite, Apt. #, etc.                                                                                                                            |                                                                                                                                            |
| City & State<br>Fort Myers                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                       | City & State                                                                                                                                                                              |                                                                                                                                            |
| Zip<br>33901                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                       | Country<br>Lee                                                                                                                                                                            |                                                                                                                                            |
| 4. FEI Number<br>20-3810731                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                       | Applied For<br>Not Applicable                                                                                                                                                             |                                                                                                                                            |
| 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                       | 04232007 Chg-LLC CR2E083 (12/06)                                                                                                                                                          |                                                                                                                                            |
| 6. Name and Address of Current Registered Agent<br>JULMEUS, EVANEL<br>3004 12TH STREET WEST<br>LEHIGH ACRES, FL 33974                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                       | 7. Name and Address of New Registered Agent<br>Name: Evanel Julmeus<br>Street Address (P.O. Box Number is Not Acceptable)<br>12440 Muddy Creek Ln.<br>City: Fort Myers FL Zip Code: 33913 |                                                                                                                                            |
| 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 the obligations of registered agent.<br>SIGNATURE: Evanel Julmeus MGRM H-24-07<br>(NOTE: Registered Agent Signature required when re-registering)                                                                                                                                                               |                                                                                                                       |                                                                                                                                                                                           |                                                                                                                                            |
| Filing Fee is \$50.00<br>Due by May 1, 2007                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                       | Make check payable to<br>Florida Department of State                                                                                                                                      |                                                                                                                                            |
| 9. MANAGING MEMBERS/MANAGERS                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                       | 10. ADDITIONS/CHANGES                                                                                                                                                                     |                                                                                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                           | MGRM<br>JULMEUS, EVANEL<br><del>3004 12TH STREET WEST</del><br>LEHIGH ACRES, FL 33974 <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                            | Evanel Julmeus <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br>12440 Muddy Creek Ln<br>Fort Myers FL 33913 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                           | MGR<br>PLANCHER, ODILE<br>2130 HARVARD AVE<br>FORT MYERS, FL 33907 <input type="checkbox"/> Delete                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                            | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                           | MGR<br>TELUSMA, JEAN<br>9566 BLUESTONE CIR<br>FORT MYERS, FL 33916 <input type="checkbox"/> Delete                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                            | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                           | MGR<br>LUBINTUS, MONISE<br>450 WALNUT ST # 201<br>ELIZABETH, NJ 07201 <input type="checkbox"/> Delete                 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                            | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                           | MGR<br>SANON, JEAN M<br>2106 JASPER AVE<br>FORT MYERS, FL 33907 <input type="checkbox"/> Delete                       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                            | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete                                                                                       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                            | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                          |
| 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:                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                       | Evanel Julmeus 5/30/07 239-872-7230                                                                                                                                                       |                                                                                                                                            |