

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000011014

FILED
Apr 22, 2009
Secretary of State

Entity Name: SOUTH FLORIDA JJ & M, LLC

Current Principal Place of Business:

TRANVERSAL 42 # 106-27
BOGOTA, . COLOMBIA

New Principal Place of Business:

Current Mailing Address:

5805 BLUE LAGOON DRIVE
STE 200
MIAMI, FL 33126 US

New Mailing Address:

FEI Number: 98-0502244

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AG CORPORATE SERVICES, LLC
5805 BLUE LAGOON DR
SUITE 200
MIAMI, FL 33126 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: MGRM () Delete
Name: MOR, ALEJANDRO
Address: TRANSVERSAL 42 # 106-27
City-St-Zip: BOGOTA, . COLOMBIA

Title: MGRM () Delete
Name: OJEDA, JAIME
Address: TRANSVERSAL 42 # 106-27
City-St-Zip: BOGOTA, . COLOMBIA

Title: MGRM () Delete
Name: OJEDA, JUANITA
Address: TRANSVERSAL 42 # 106-27
City-St-Zip: BOGOTA, . COLOMBIA

ADDITIONS/CHANGES:

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

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: ALEJANDRO MOR

MGRM

04/22/2009

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