

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000016171

Entity Name: SYJL LLC

FILED  
Feb 27, 2008  
Secretary of State

## Current Principal Place of Business:

1614 52ND DRIVE WEST  
PALMETTO, FL 34221

## New Principal Place of Business:

556 S. FAIR OAKS AVE.  
#320  
PASADENA, CA 91105

## Current Mailing Address:

556 S. FAIR OAKS AVE.  
#320  
PASADENA, CA 91105

## New Mailing Address:

FEI Number: 20-4424201      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: MGR ( ) Delete  
Name: HUTCHINSON, JOEL L  
Address: 1614 52ND DRIVE WEST  
City-St-Zip: PALMETTO, FL 34221

Title: ST ( ) Delete  
Name: HUTCHINSON, JOEL L  
Address: 1614 52ND DRIVE WEST  
City-St-Zip: PALMETTO, FL 34221

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: HUTCHINSON, JOEL L  
Address: 556 S. FAIR OAKS AVE. #320  
City-St-Zip: PASADENA, CA 91105

Title: ST (X) Change ( ) Addition  
Name: HUTCHINSON, JOEL L  
Address: 556 S. FAIR OAKS AVE. #320  
City-St-Zip: PASADENA, CA 91105

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: JOEL HUTCHINSON

MGR

02/27/2008

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