2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 30, 2008 08:00 AM Secretary of State DOCUMENT # L06000016517 J & J HOLDINGS, LLC Principal Place of Business Mailing Address 60 EDGEWATER DRIVE #1602 60 EDGEWATER DRIVE #1602 CORAL GABLES, FL 33133 CORAL GABLES, FL 33133 04022008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-4346833 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BRENNAN, MANNA & DIAMOND, P.L. DO NOT WRITE 76 SOUTH LAURA STREET STE 2110 JACKSONVILLE, FL 32202 IN THIS SPACE 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. Signature, typed or printed name of registered agent and little II applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGR TITLE VOGLINO, JAMES A NAME STREET ADDRESS 60 EDGEWATER DRIVE #1602 CORAL GABLES, FL 33133 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions indicated on this report is true and accurate and that my signature shall have the sappling limited liability company or the receiver or trustee empowered to execute this person require. contained in Chapter 119, Florida Statutes. I further certify that the information flect as if made under oath; that I am a managing member or manager of the d by Chapter 608, Florida Statutes.

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

Daytime Phone #