

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000023769

Entity Name: JHPA LLC

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

C/O JOHAN F. HAGSTROM  
6460 MAIN STREET, 5-108  
MIAMI LAKES, FL 33014

**New Principal Place of Business:**

C/O JOHAN F. HAGSTROM  
3419 HARNESS CIRCLE  
WELLINGTON, FL 33449

**Current Mailing Address:**

C/O JOHAN F. HAGSTROM  
6460 MAIN STREET, 5-108  
MIAMI LAKES, FL 33014

**New Mailing Address:**

C/O JOHAN F. HAGSTROM  
5480 NW 161ST STREET  
MIAMI GARDENS, FL 33014

FEI Number: 20-4448026

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HAGSTROM, JOHAN F  
6460 MAIN STREET, 5-108  
MIAMI LAKES, FL 33014 US

**Name and Address of New Registered Agent:**

HAGSTROM, JOHAN F  
3419 HARNESS CIRCLE  
WELLINGTON, FL 33449 US

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: \_\_\_\_\_

01/05/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HAGSTROM, JOHAN F  
Address: 3419 HARNESS CIRCLE  
City-St-Zip: WELLINGTON, FL 33449

I hereby 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: JOHAN F. HAGSTROM

MGMR

01/05/2010

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