

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000066632

Entity Name: JACQUES CAPITAL LLC

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

2633 NE 37TH DRIVE
FT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

2633 NE 37TH DRIVE
FT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 02-0516941

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGENTS AND CORPORATIONS, INC.
300 FIFTH AVENUE SOUTH
SUITE 101-330
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

JACQUES, MARION
2633 NE 37TH DRIVE
FORT LAUDERDALE, FL 33308 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: MARION JACQUES

04/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: JACQUES, RANDALL S
Address: 2633 NE 37TH DRIVE
City-St-Zip: FT LAUDERDALE, FL 33308

Title: MGR () Delete
Name: JACQUES, MARION M
Address: 2633 NE 37TH DRIVE
City-St-Zip: FT LAUDERDALE, FL 33308

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JACQUES, RANDALL S
Address: 2633 NE 37TH DRIVE
City-St-Zip: FT LAUDERDALE, FL 33308

Title: MGRM (X) Change () Addition
Name: JACQUES, MARION M
Address: 2633 NE 37TH DRIVE
City-St-Zip: FT LAUDERDALE, FL 33308

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: RANDALL JACQUES

MGRM

04/28/2008

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