

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000107343

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: JOBU ENTERPRISES II, LLC

## Current Principal Place of Business:

18751 S.E. RIVER RIDGE ROAD  
TEQUESTA, FL 33469 US

## New Principal Place of Business:

631 US HIGHWAY ONE  
SUITE 202  
NORTH PALM BEACH, FL 33408 US

## Current Mailing Address:

18751 S.E. RIVER RIDGE ROAD  
TEQUESTA, FL 33469 US

## New Mailing Address:

631 US HIGHWAY ONE  
SUITE 202  
NORTH PALM BEACH, FL 33408 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VASTOLA, JEFF D ESQ  
18751 S.E. RIVER RIDGE ROAD  
TEQUESTA, FL 33469 US

## Name and Address of New Registered Agent:

VASTOLA, JEFF D ESQ  
631 US HIGHWAY ONE  
SUITE 202  
NORTH PALM BEACH, FL 33408 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: JEFF D. VASTOLA, ESQ. 03/23/2009  
\_\_\_\_\_  
Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: VASTOLA, JEFF D ESQ  
Address: 18751 S.E. RIVER RIDGE ROAD  
City-St-Zip: TEQUESTA, FL 33469 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: VASTOLA, JEFF D ESQ  
Address: 631 US HIGHWAY ONE, SUITE 202  
City-St-Zip: NORTH PALM BEACH, FL 33408 US

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: JEFF D. VASTOLA, ESQ. MGRM 03/23/2009  
\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date