

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000120884

1. Entity Name

J & J HOLLYWOOD HOLDINGS LLC



Principal Place of Business

1000 ISLAND BLVD

APT. 2705

AVENTURA, FL 33160 US

Mailing Address

1000 ISLAND BLVD

APT. 2705

AVENTURA, FL 33160 US

DO NOT WRITE IN THIS SPACE

FILED
Sep 09, 2008 08:00 AM
Secretary of State



05132008No Chg-LLC

CR2E083 (12/07)

4. FEI Number

20-8079715

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CASTANEDA, JOHNATHAN F

1000 ISLAND BLVD

APT. 2705

AVENTURA, FL 33160

**DO NOT WRITE
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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75
(Due by September 12, 2008)

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
CASTANEDA, JOHANTHAN F
1000 ISLAND BLVD. APT. 2705
AVENTURA, FL 33160

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
CASTANEDA, JACK
6 WHITSON RD.
BRIARCLIFF MANOR, NY 10510

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000959349
09/09/08-80006-019 138.75

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

9-408