

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000006974

Entity Name: LHJ ENTERPRISES, LLC

FILED  
Feb 05, 2009  
Secretary of State

**Current Principal Place of Business:**

6495 BRAVA WAY  
BOCA RATON, FL 33433

**New Principal Place of Business:**

**Current Mailing Address:**

6495 BRAVA WAY  
BOCA RATON, FL 33433

**New Mailing Address:**

FEI Number: 20-8746689

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RIINA, JOSEPH  
6495 BRAVA WAY  
BOCA RATON, FL 33433 US

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

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PTD ( ) Delete  
Name: RIINA, JOSEPH  
Address: 6495 BRAVA WY  
City-St-Zip: BOCA RATON, FL 33433

Title: VSD ( ) Delete  
Name: RIIDA, GLORIA  
Address: 6495 BRAVA WY  
City-St-Zip: BOCA RATON, FL 33433

**ADDITIONS/CHANGES:**

Title: PTD (X) Change ( ) Addition  
Name: RIINA, JOSEPH  
Address: 6495 BRAVA WY  
City-St-Zip: BOCA RATON, FL 33433

Title: VSD (X) Change ( ) Addition  
Name: RIINA, GLORIA  
Address: 6495 BRAVA WY  
City-St-Zip: BOCA RATON, FL 33433

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: JOSEPH RIINA

PRES

02/05/2009

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