

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000007985

Entity Name: J CUBED ENTERPRISES, LLC

FILED
Jan 16, 2009
Secretary of State

Current Principal Place of Business:

572 N. ISLAND DRIVE
GOLDEN BEACH, FL 33160 US

New Principal Place of Business:

Current Mailing Address:

572 N. ISLAND DRIVE
GOLDEN BEACH, FL 33160 US

New Mailing Address:

FEI Number: 20-8299095

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EGOZI, BERNARD L
2999 NE 191ST STREET
SUITE 407
AVENTURA, FL 33180 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: MGRM () Delete
Name: BEN-SHMUEL, IZAC
Address: 21050 POINT PLACE, #805
City-St-Zip: AVNETURA, FL 33180 US

Title: MGR () Delete
Name: BEN-SHMUEL, ABBY
Address: 21050 POINT PLACE, # 805
City-St-Zip: AVENTURA, FL 33180 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BEN-SHMUEL, IZAC
Address: 572 N. ISLAND DRIVE
City-St-Zip: GOLDEN BEACH, FL 33160 US

Title: MGR (X) Change () Addition
Name: BEN-SHMUEL, ABBY
Address: 572 N. ISLAND DRIVE
City-St-Zip: GOLDEN BEACH, FL 33160 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: IZAC BEN-SHMUEL

MGRM

01/16/2009

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