

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Aug 29, 2008  
Secretary of State**

DOCUMENT# L07000018644

Entity Name: LJEF, LLC

**Current Principal Place of Business:**

1299 NW 166TH AVENUE  
PEMBROKE PINES, FL 33028

**New Principal Place of Business:**

**Current Mailing Address:**

1299 NW 166TH AVENUE  
PEMBROKE PINES, FL 33028

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

JEAN, ERROL  
1299 NW 166TH AVENUE  
PEMBROKE PINES, FL 33028    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:                      JEAN, ERROL  
Address:                      1299 NW 166TH AVENUE  
City-St-Zip:                      PEMBROKE PINES, FL 33028

**ADDITIONS/CHANGES:**

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ERROL JEAN

MGRM

08/29/2008

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