

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jun 19, 2008 8:00 am
Secretary of State

04-28-2008 90058 044 ***138.75

DOCUMENT # L07000048056																					
1. Entity Name JRJD, LLC		Principal Place of Business 555 SW 12TH AVENUE, STE. 100 POMPANO BEACH, FL 33069																			
2. Principal Place of Business - No P.O. Box # 501 STIRLING RD		3. Mailing Address PO BOX 668035																			
City & State DAVIA BEACH FL		City & State POMPANO BEACH FL																			
Zip 33004		Zip 33066																			
Country USA		Country USA																			
4. EEI Number 26-0310166		Applied For ☐ Not Applicable																			
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required		6. Name and Address of Current Registered Agent GOLDMAN, BRUCE J ESQ. 2655 LE JEUNE ROAD, STE. 816 CORAL GABLES, FL 33134																			
7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		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 reappointing) _____ DATE _____																					
FILE NOW!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State																			
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES																			
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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:		Date: 4-23-08																			
Signature and typed or printed name of managing member, manager, or authorized representative: M. ROBBINS		Date: 4-23-08																			

MANAGING
MEMBER

MANAGER