

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000054777

Entity Name: JHJ DOWNTOWN, L.L.C.

FILED
Jan 19, 2009
Secretary of State

Current Principal Place of Business:

68 WEST FLAGLER ST.
MIAMI, FL 33130

New Principal Place of Business:

270 EAST FLAGLER ST.
MIAMI, FL 33131

Current Mailing Address:

68 WEST FLAGLER ST.
MIAMI, FL 33130

New Mailing Address:

4 SE 1 STREET
MIAMI, FL 33131

FEI Number: 26-0206151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVER, IRA S
108 SOUTH MIAMI AVENUE, SECOND FL
MIAMI, FL 33130 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: OLIVEIRA, HORACIO
Address: 68 WEST FLAGLER ST.
City-St-Zip: MIAMI, FL 33130

Title: MGRM () Delete
Name: PORCIELO, JENNIFER
Address: 68 WEST FLAGLER ST.
City-St-Zip: MIAMI, FL 33130

Title: MGRM () Delete
Name: GOYANES, JOSE A
Address: 68 WEST FLAGLER ST.
City-St-Zip: MIAMI, FL 33130

ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change () Addition
Name: GOYANES, JOSE A
Address: 4 SE 1 STREET
City-St-Zip: MIAMI, FL 33131

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: JOSE A GOYANES

MGRM

01/19/2009

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