2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 07, 2008
Secretary of State

DOCUMENT# L07000060108

Entity Name: J DREAMS HAV, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
35-37 S. 9W HAVERSTRAW, NY 10927	

Current Mailing Address:	**New Mailing Address:**
370 CENTERPOINTE CIR., SUITE 1154 ALTAMONTE SPRINGS, FL 32701	705 WEST SR 434 SUITE D LONGWOOD, FL 32750

FEI Number: 26-0210921   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired (X)

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:	**Name and Address of New Registered Agent:**
VOCCIA, DANIEL J II 2115 KILIMANJARO CT APOPKA, FL 32712 US	

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:	**ADDITIONS/CHANGES:**
Title: MGRM ( ) Delete Name: PIZZUTI, RICHARD A Address: 5380 DEEPWOODS CT. City-St-Zip: SANDFORD, FL 32771	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: MGRM ( ) Delete Name: PIZZUTI, SHARON L Address: 5380 DEEPWOODS CT. City-St-Zip: SANDFORD, FL 32771	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: MGR ( ) Delete Name: PEERY, ZACHARY Address: 3087 PIGEON COVE ST. City-St-Zip: DELTONA, FL 32748	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: SHARON L PIZZUTI   MGRM   07/07/2008
_____
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date