

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000060369

Entity Name: JENNY G. LLC.

FILED  
Apr 20, 2009  
Secretary of State

## Current Principal Place of Business:

6625 MIAMI LAKES DRIVE  
SUITE 377  
MIAMI LAKES, FL 33014 US

## Current Mailing Address:

6625 MIAMI LAKES DRIVE  
SUITE 377  
MIAMI LAKES, FL 33014 US

## New Principal Place of Business:

6625 MIAMI LAKES DRIVE  
SUITE 365  
MIAMI LAKES, FL 33014 US

## New Mailing Address:

6625 MIAMI LAKES DRIVE  
SUITE 365  
MIAMI LAKES, FL 33014 US

FEI Number: 26-0326499

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GONZALEZ, GUILLERMO J  
6625 MIAMI LAKES DRIVE  
SUITE 377  
MIAMI LAKES, FL 33014 US

## Name and Address of New Registered Agent:

GONZALEZ, GUILLERMO J  
6625 MIAMI LAKES DRIVE  
SUITE 365  
MIAMI LAKES, FL 33014 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: GUILLERMO GONZALEZ

04/20/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: GONZALEZ, GUILLERMO J  
Address: 6625 MIAMI LAKES DRIVE SUITE 377  
City-St-Zip: MIAMI LAKES, FL 33014 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: GONZALEZ, GUILLERMO J  
Address: 6625 MIAMI LAKES DRIVE SUITE 365  
City-St-Zip: MIAMI LAKES, FL 33014 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: GUILLERMO GONZALEZ

MNGR

04/20/2009

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