

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000083599

FILED  
Jan 23, 2008  
Secretary of State

Entity Name: PJ'S PARTNERSHIP, L.L.C.

## Current Principal Place of Business:

5700 COLLINS AVENUE  
SUITE 4J  
MIAMI BEACH, FL 33140 US

## New Principal Place of Business:

## Current Mailing Address:

5700 COLLINS AVENUE  
SUITE 4J  
MIAMI BEACH, FL 33140 US

## New Mailing Address:

P.O. BOX 40-2034  
MIAMI BEACH, FL 33140 US

FEI Number: 26-0715210

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARO, JACQUELYN J  
5700 COLLINS AVENUE  
SUITE 4J  
MIAMI BEACH, FL 33140 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: CARO, JACQUELYN J  
Address: 5700 COLLINS AVENUE SUITE 4J  
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: MGRM ( ) Delete  
Name: SZUTAR, PATRICK S  
Address: 5700 COLLINS AVENUE 4J  
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: CARO, JACQUELYN J  
Address: P.O. BOX 40-2034  
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: MGRM (X) Change ( ) Addition  
Name: SZUTAR, PATRICK S  
Address: P.O. BOX 40-2034  
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: MGR ( ) Change (X) Addition  
Name: SZUTAR, CHRISTOPHER S  
Address: P.O. BOX 40-2034  
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: MGR ( ) Change (X) Addition  
Name: SZUTAR, CHRISTINE  
Address: P.O. BOX 40-2034  
City-St-Zip: MIAMI BEACH, FL 33140 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: JACQUELYN CARO

MGRM

01/23/2008

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