

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000084841

Entity Name: F & J SYSTEMS, L.L.C.

FILED
Jul 07, 2008
Secretary of State

Current Principal Place of Business:

3948 NE 169 STREET
405
N. MIAMI BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

3948 NE 169 STREET
405
N. MIAMI BEACH, FL 33160

New Mailing Address:

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

SORSHER, ALEX
2500-1 N STATE ROAD 7
HOLLYWOOD, FL 33021 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:

Title: MGR () Delete
Name: FRANK A. VILLANI, P., A.
Address: 3948 NE 169 STREET STE 405
City-St-Zip: N. MIAMI BEACH, FL 33160

Title: MGR () Delete
Name: TEISCH, JEFFREY
Address: 3948 NE 169 STREET STE 405
City-St-Zip: N. MIAMI BEACH, FL 33160

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: VILANI, FRANK
Address: 3948 NE 169 STREET STE 405
City-St-Zip: N. MIAMI BEACH, FL 33160

Title: VP (X) Change () Addition
Name: DECOSIMO, MICHAEL
Address: 3948 NE 169 STREET STE 405
City-St-Zip: N. MIAMI BEACH, FL 33160

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: FRANK VILANI

P

07/07/2008

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