2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 09, 2008
Secretary of State

DOCUMENT# L07000101104

Entity Name: JND CONSULTING GROUP LLC

Current Principal Place of Business:

9751 ALASKA CIRCLE
BOCA RATON, FL 33434

New Principal Place of Business:

Current Mailing Address:

9751 ALASKA CIRCLE
BOCA RATON, FL 33434

New Mailing Address:

FEI Number: 22-3969846 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

RAMOS, JOSEPH R OWNER
9751 ALASKA CIRCLE
BOCA RATON, FL 33434 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: JOSEPH RAMOS 01/09/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: RAMOS, JOE
Address: 9751 ALASKA CIRCLE
City-St-Zip: BOCA RATON, FL 33434

Title: MGR ( ) Delete
Name: RAMOS, DAVID
Address: 9751 ALASKA CIRCLE
City-St-Zip: BOCA RATON, FL 33434

Title: S R ( ) Delete
Name: RAMOS, DAVID
Address: 9751 ALASKA CIRCLE
City-St-Zip: BOCA RATON, FL 33434

ADDITIONS/CHANGES:

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

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

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: JOSEPH RAMOS MR. 01/09/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date