

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000108430

Entity Name: J.R. ESTATES, LLC

FILED  
Aug 14, 2008  
Secretary of State

**Current Principal Place of Business:**

157 COLIGNI AVENUE  
NEW ROCHELLE, NY 10801

**New Principal Place of Business:**

**Current Mailing Address:**

157 COLIGNI AVENUE  
NEW ROCHELLE, NY 10801

**New Mailing Address:**

FEI Number: 26-1357572      FEI Number Applied For ( )      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:**

THOMAS, JAISON  
5522 PARADISE CAY CIRCLE  
KISSIMMEE, FL 34746 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: MGR ( ) Delete  
Name: THOMAS, JAISON  
Address: 157 COLIGNI AVENUE  
City-St-Zip: NEW ROCHELLE, NY 10801

Title: MGR ( ) Delete  
Name: RAJAN, RAJEESH  
Address: 197 RUTGERS ROAD  
City-St-Zip: ORAGEBURG, NY 10962

Title: MGR ( ) Delete  
Name: CHACKO, JOSEPH  
Address: 17 CRESTVIEW PLACE  
City-St-Zip: NEW ROCHELLE, NY 10801

Title: MGR ( ) Delete  
Name: RAJAN, RAJEEVE  
Address: 197 RUTGERS ROAD  
City-St-Zip: ORAGEBURG, NY 10962

**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:

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: JAISON THOMAS

MGR

08/14/2008

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