

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000113452

Entity Name: J.R.G FAMILY GROUP LLC

FILED
Jun 18, 2008
Secretary of State

Current Principal Place of Business:

1080 SE 9TH AVE
HIALEAH, FL 33010

New Principal Place of Business:

Current Mailing Address:

1080 SE 9TH AVE
HIALEAH, FL 33010

New Mailing Address:

FEI Number: 26-1387567 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

BLANCO, ROXANA
1080 SE 9TH AVE
HIALEAH, FL 33010 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: BLANCO, ROXANA
Address: 1080 SE 9TH AVE
City-St-Zip: HIALEAH, FL 33010

Title: MGRM () Delete
Name: BLANCO, JOSE
Address: 1080 SE 9TH AVE
City-St-Zip: HIALEAH, FL 33010

Title: MGRM () Delete
Name: SOTO, GEOVANNI
Address: 1080 SE 9TH AVE
City-St-Zip: HIALEAH, FL 33010

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: BLANCO, JOSE R
Address: 1080 SE 9TH AVE
City-St-Zip: HIALEAH, FL 33010

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: ROXANA BLANCO

MGR

06/18/2008

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