

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000044366

Entity Name: CJ PARTY HOUSE LLC.

FILED
Jan 20, 2009
Secretary of State

Current Principal Place of Business:

8850 N.W. 13 TERRACE
SUITE 101
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

9505 S.W. 166 AVENUE
MIAMI, FL 33196

New Mailing Address:

FEI Number: 26-2273904

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VITA, BARBARA
9505 S.W. 166TH AVENUE
MIAMI, FL 33196 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: VITA, BARBARA
Address: 9505 S.W. 166 AVENUE
City-St-Zip: MIAMI, FL 33196

Title: MGR () Delete
Name: VITA, CHRISTOPHER
Address: 9505 S.W. 166 AVENUE
City-St-Zip: MIAMI, FL 33196

Title: MGRM () Delete
Name: VITA, JONATHAN
Address: 9505 S.W. 166 AVENUE
City-St-Zip: MIAMI, FL 33196

Title: MGR () Delete
Name: ACOSTA, ORLANDO
Address: 11039 N.W. 1 TERRACE
City-St-Zip: MIAMI, FL 33172

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

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: MGR (X) Change () Addition
Name: ACOSTA, EILLEN
Address: 19800 SW 180 AVE, LOT 529
City-St-Zip: MIAMI, FL 33187

Title: MGR () Change (X) Addition
Name: ACOSTA, ANNETTE
Address: 19800 SW 180 AVE, LOT 529
City-St-Zip: MIAMI, FL 33187

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: BARBARA VITA

MGR

01/20/2009

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