

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000054348

Entity Name: AJU INVESTMENTS, LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

250 174 ST
405
SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

250 174 ST
405
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

3140 S. OCEAN DR.
2409
HALLANDALE BEACH, FL 33009

New Mailing Address:

3140 S. OCEAN DR.
2409
HALLANDALE BEACH, FL 33009

FEI Number: 26-2759469

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REVILLA-ALBO, JOSE M
250 174 ST
405
SUNNY ISLES BEACH, FL 33160 US

Name and Address of New Registered Agent:

REVILLA-ALBO, JOSE M
3140 S. OCEAN DR
2409
HALLANDALE BEACH, FL 33009 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: JRA

04/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: REVILLA-ALBO, JOSE M
Address: 250 174 ST
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGR () Delete
Name: AVIDAN, URI
Address: 250 174 ST
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: AVIDAN, URI
Address: 3140 S. OCEAN DR # 2409
City-St-Zip: HALLANDALE BEACH, FL 33009

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: JRA

MGR

04/29/2009

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