

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000101027

FILED
May 14, 2009
Secretary of State

Entity Name: JAG ENTERPRISES GROUP, LLC

Current Principal Place of Business:

4321 SOUTH LE JEUNE ROAD
CORAL GABLES, FL 33146

New Principal Place of Business:

4231 SOUTH LE JEUNE ROAD
CORAL GABLES, FL 33146

Current Mailing Address:

4321 SOUTH LE JEUNE ROAD
CORAL GABLES, FL 33146

New Mailing Address:

4231 SOUTH LE JEUNE ROAD
CORAL GABLES, FL 33146

FEI Number: 26-3615050 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:

GEORGE J. VILA, P.A.
100 ALMEIRA AVE., SUITE 205
CORAL GABLES, FL 33134 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: MGRM () Delete
Name: A. DUARTE, INC.
Address: 2520 S.W. 22ND STREET, STE. 2-377
City-St-Zip: MIAMI, FL 33145

Title: MGRM () Delete
Name: GJVPA INVESTMENTS, INC.
Address: 100 ALMEIRA AVE., SUITE 205
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

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: GEORGE J. VILA

MGRM

05/14/2009

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