

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000028072

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

**Entity Name:** SCJ HOSPITALITY & STAFFING SERVICES, LLC

**Current Principal Place of Business:**

1335 GATE WAY DRIVE  
LANTANA, FL 33462

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 6021  
LAKE WORTH, FL 33461

**New Mailing Address:**

P O BOX 697  
LAKE WORTH, FL 33460

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHARLES, SCHNAIDER  
416 MARTIN AVE  
GREENACRES, FL 33463 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  
Name: CHARLES, SCHNAIDER  
Address: 416 MARTIN AVE  
City-St-Zip: GREENACRES, FL 33463

Title: MGR  
Name: ULYSSE, JEAN E  
Address: 530 SOUTH A STREET  
City-St-Zip: LAKE WORTH, FL 33460

I hereby 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: SCHNAIDER CHARLES

MGR

04/29/2012

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