

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000125798

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** OJ'S HELPING HANDS ENTERPRISES, LLC

**Current Principal Place of Business:**

1520 E. 26TH AVENUE  
TAMPA, FL, 33605

**New Principal Place of Business:**

1520 E. 26TH AVENUE  
TAMPA, FL 33605

**Current Mailing Address:**

PO BOX 5772  
TAMPA, FL 33675

**New Mailing Address:**

1520 E. 26TH AVENUE  
TAMPA, FL 33605

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MURDOCK, ORENTAL  
1520 E. 26TH AVENUE  
TAMPA, FL 33605 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: MURDOCK, ORENTAL  
Address: PO BOX 5772  
City-St-Zip: TAMPA, FL 33675

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: ORENTAL MURDOCK

MGR

04/30/2012

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