

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000139374

Entity Name: CJRM, LLC

**FILED**  
**Mar 14, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5011 SOUTH STATE ROAD 7,  
SUITE 106  
DAVIE, FL 33314

**New Principal Place of Business:**

5011 SOUTH STATE ROAD  
SUITE 106  
DAVIE, FL 33314

**Current Mailing Address:**

1010 NORTHERN BOULEVARD  
SUITE 400  
GREAT NECK, NY 11021

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

VCORP SERVICES, LLC  
5011 SOUTH STATE ROAD 7  
SUITE 106  
DAVIE, FL 33314 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: BROWN, CHRISTOPHER J CPA  
Address: 1860 WALT WHITMAN ROAD - SUITE 900  
City-St-Zip: MELVILLE,, NY 11747

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: CHRISTOPHER BROWN MGR 03/14/2012

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