

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 19, 2005 8:00 am
Secretary of State

03-21-2005 90540 031 ****50.00

DOCUMENT # L99000003344 1. Entity Name JFC INVESTMENTS, L.L.C.			
Principal Place of Business 2001 HARBOR VIEW CIRCLE WESTON, FL 33327		Mailing Address 2001 HARBOR VIEW CIRCLE WESTON, FL 33327	
2. Principal Place of Business 2201 North Commerce Pkwy		3. Mailing Address 2201 N Commerce Parkway	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State Weston, FL		City & State Weston, FL	
Zip 33326		Zip 33326	
Country USA		Country USA	
4. FEI Number 65-0969131		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required		03152005 Chg-LLC CR2E083 (10/03)	
6. Name and Address of Current Registered Agent CORREA, JOSE F 2001 HARBOR VIEW CIRCLE WESTON, FL 33327		7. Name and Address of New Registered Agent Name JOSE F. CORREA Street Address (P.O. Box Number is Not Acceptable) 2201 N Commerce Parkway City Weston FL Zip Code 33326	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE: (NOTE: Registered Agent signature required when renewing) DATE:			
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM CORREA, JOSE 2001 HARBOR VIEW CIRCLE WESTON, FL 33327	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM CORREA, JOSE 2201 N Commerce Parkway Weston, FL 33326
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Member Managing Member LORELL S. GREEN CORREA 2201 N Commerce Parkway Weston, FL 33326
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:		Jose F. Correa March 15/05 (954) 805-1187	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #	