ANNUAL REPORT

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DOCUMENT # L99000007136

1. Entity Name
JAZ PROPERTIES, L.L.C.



05-11-2004 90003 004 ****50.00

Principal Place of Business

204 NORTH 11TH AVENUE TAMPA, FL 33602

Mailing Address

204 NORTH 11TH AVENUE TAMPA, FL 33602

6401104



FILED

May 11, 2004 8:00 am Secretary of State

04292004 No Chg-LLC

CR2E083 (10/03)

4.	FEI Number			Applied For
	59-3615727			Not Applicable
5.	Certificate of Status Desired		\$5.00 Additional Fee Required	

200

6. Name and Address of Current Registered Agent

HUDOBA, STEPHEN M 101 EAST KENNEDY BLVD STE 3700 TAMPA, FL 33602

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	named entity submits this statement for the purpose of char tions of registered agent.	nging its registered office or registered agent, or both, in the	State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title # applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Fi Di	iling Fee is \$50.00 ue by May 1, 2004		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME	MGRM ZINK, JAMES A	and the second of the second o	
STREET ADDRESS CITY-ST-ZIP	204 N. 11TH STREET TAMPA, FL 33602		

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NAME STREET ADDRESS	MGRM ZINK, JAMES A 204 N. 11TH STREET	
CITY-ST-ZIP	TAMPA, FL 33602	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ZINK, TIMOTHY A 204 N. 11TH STREET TAMPA, FL 33602	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the e		

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:

1204 813-273-9226

Davtime Phone #