


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2008 08:00 AM
Secretary of State

DOCUMENT # P02000104435	
1. Entity Name JLL ENTERPRISES, INC.	

Principal Place of Business 647 WATERSIDE WAY SARASOTA, FL 34242 US	Mailing Address 647 WATERSIDE WAY SARASOTA, FL 34242 US
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02212008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 22-3873689	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent LEFROCK, JACK L 647 WATERSIDE WAY SARASOTA, FL 34242

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V LEFROCK, JASON M 5855 DRIFTWOOD AVENUE SARASOTA, FL 342313105
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T LEFROCK, ALYSSA 8820 E SAN RAFAEL DR SCOTTSDALE, AZ 85258
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S TASSOTTI, JOHN L 3279 BENEVA RD # 202 SARASOTA, FL 34232
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P LEFROCK, JACK L 647 WATERSIDE WAY SARASOTA, FL 34242
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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04/15/08-80079-016-150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jack L LeFrock Jack L LeFrock 4/1/08 941 809 7559
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #