

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000005291

Entity Name: KARAM, L.L.C.

FILED
Jul 03, 2007
Secretary of State

Current Principal Place of Business:

4124 WEST COLONIAL DR.
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

4124 WEST COLONIAL DR.
ORLANDO, FL 32808

New Mailing Address:

FEI Number: 59-3709710 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ERROUDANI, JAMAL
4757 G WALDEN GREEN CIRCLE
ORLANDO, FL 32811 US

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: MGRM () Delete
Name: ERROUDANI, JAMAL
Address: 4757 G WALDEN GREEN CIRCLE
City-St-Zip: ORLANDO, FL 32811

Title: MGRM () Delete
Name: ERROUDANI, EL HASSAN
Address: 7812 BRIDGESTONE DR.
City-St-Zip: ORLANDO, FL 32835

Title: MGRM (X) Delete
Name: ATTA, MOHAMED
Address: 4124 WEST COLONIAL DR
City-St-Zip: ORLANDO, FL 32808

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: ERROUDANI EL HASSAN

MGRM

07/03/2007

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