2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000006303

Entity Name: C/MAX CAPITAL GP - VI, LLC

FILED Jan 11, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1550 SAWGRASS CPT PKY 20155 NE 38 COURT

SUNRISE, FL 33323 #2304

AVENTURA, FL 33180

Current Mailing Address: New Mailing Address:

1550 SAWGRASS CPT PKY 20155 NE 38 COURT

SUNRISE, FL 33323 #2304

AVENTURA, FL 33180

FEI Number: 33-1044402 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WATSON, MARC M WATSON, MARC M 1550 SAWGRASS CPT PKY 20155 NE 38 COURT

SUNRISE, FL 33323 #2304 AVENTURA, FL 33180 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: 01/11/2008

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: MGRM (X) Change () Addition () Delete

WATSON, KEVIN M Name: Name: WATSON, KEVIN M Address: 1550 SAWGRASS CPT PKY #150 Address: 1642 SE 13 ST

City-St-Zip: SUNRISE, FL 33323 City-St-Zip: FORT LAUDERDALE, FL 33316

Title: MGRM Title: MGRM

(X) Change () Addition () Delete Name: WATSON, MARC M Name: WATSON, MARC M

Address: 1550 SAWGRASS CPT PKY #150 Address: 20155 NE 38 COURT #2304 City-St-Zip: SUNRISE, FL 33323 City-St-Zip: AVENTURA, FL 33180

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: KEVIN WATSON **MGRM** 01/11/2008