2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000037480

Entity Name: KAM FASHION LLC

City-St-Zip:

FILED Feb 09, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 777 NW 72ND AVENUE SHOWROOM 2F11 MIAMI, FL 33126 **Current Mailing Address: New Mailing Address:** 777 NW 72ND AVENUE SHOWROOM 2F11 MIAMI, FL 33126 FEI Number: 20-0294027 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: ALAVA, KATHERINE MORAN, OSWALDO 4675 WEST 18 COURT 4675 WÉST 18 COURT APT# 612 APT# 612 HIALEAH, FL 33012 US HIALEAH, FL 33012 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: OSWALDO MORAN 02/09/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MORAN, OSWALDO Name: Name: 8041 LAKE DRIVE SUITE # 101 Address: Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: MORAN, OSWALDO JR. Name: Address: 8041 LAKE DRIVE SUITE 101 Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MORAN, JANETH Name: Name: 8041 LAKE DRIVE SUITE 101 Address: Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MORAN, JOHN Name: Name: 8041 LAKE DRIVE SUITE # 101 Address: Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: Title: () Delete Title: MGR () Change (X) Addition MORAN, OSWALDO Name: Name: 8041 LAKE DRIVE # 101 Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

DORAL, FL 33166

SIGNATURE: OSWALDO MORAN MGR 02/09/2006