## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000043007

1. Entity Name
JAMO MANAGEMENT, LLC

FILED Apr 27, 2007 08:00 AM Secretary of State

Principal Place of Business

550 BILTMORE WAY, SUITE 1110 CORAL GABLES, FL 33134

Mailing Address

550 BILTMORE WAY, SUITE 1110 CORAL GABLES, FL 33134



DO NOT WRITE IN THIS SPACE

03282007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 54-2153793

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHECHTER, ROSA E 550 BILTMORE WAY, SUITE 1110 CORAL GABLES, FL 33134

## 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
Filing Fee is \$50.00 Due by May 1, 2007				
9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGRM			
NAME	HORWITZ, ROBERTO TRUSTEE			
STREET ADDRESS	550 BILTMORE WAY, SUITE 1110			
CITY-ST-ZIP	CORAL GABLES, FL 33134			
TITLE				
NAME				Unonno79799a
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11. 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 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 effect this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

URE:

Roberto Horwitz

4/13/09

(305) 461-2440

Date

Daytime Phone #