

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000083338

Entity Name: JAMIFAM COMPANY, LLC

FILED  
Apr 23, 2009  
Secretary of State

**Current Principal Place of Business:**

7975 SW 52 CT  
MIAMI, FL 33143

**New Principal Place of Business:**

5770 LA LUNETTA AVENUE  
MIAMI, FL 33155

**Current Mailing Address:**

7975 SW 52 CT  
MIAMI, FL 33143

**New Mailing Address:**

5770 LA LUNETTA AVE  
MIAMI, FL 33155

FEI Number: 20-1920120

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROSEN, BORIS  
1001 BRICKELL BAY DR  
STE 1400  
MIAMI, FL 33131 US

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

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: MURCIA, JAIME H  
Address: 7975 SW 52 CT  
City-St-Zip: MIAMI, FL 33143

Title: MGRM ( ) Delete  
Name: MURCIA, ISABEL  
Address: 2 GROVE ISLE DRIVE, UNIT 1009  
City-St-Zip: MIAMI, FL 33133

**ADDITIONS/CHANGES:**

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: MARIA ISABEL MURCIA

MGR

04/23/2009

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