

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000094009

Entity Name: CAMZU I LLC

FILED  
Mar 10, 2005  
Secretary of State

**Current Principal Place of Business:**

500 BAYVIEW DR SUITE 818  
SUNNY ISLES BEACH, FL 33160

**New Principal Place of Business:**

500 BAYVIEW DR SUITE 724  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

500 BAYVIEW DR SUITE 818  
SUNNY ISLES BEACH, FL 33160

**New Mailing Address:**

500 BAYVIEW DR SUITE 724  
SUNNY ISLES BEACH, FL 33160

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MOLINA, CARLOS A  
500 BAYVIEW DR SUITE 818  
SUNNY ISLES BEACH, FL 33160 US

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

MOLINA, CARLOS A  
500 BAYVIEW DR SUITE 724  
SUNNY ISLES BEACH, FL 33160 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:

03/10/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: MOLINA, CARLOS A  
Address: 500 BAYVIEW DR SUITE 818  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CARLOS A MOLINA

MGRM

03/10/2005

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