2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000006548

Entity Name: CAMEI CONDOMINIUM HOLDINGS, LLC

FILED Apr 27, 2007 Secretary of State

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

1301 NW 89TH COURT 9786 NW 29TH TERRACE

SUITE 219 MIAMI, FL 33172 MIAMI, FL 33172

Current Mailing Address: New Mailing Address:

1301 NW 89TH COURT 9786 NW 29TH TERRACE

SUITE 219 MIAMI, FL 33172 MIAMI, FL 33172

FEI Number: 20-2256076 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:

KOJNOVER, DIEGO TORRES, GABRIEL
1301 NW 89TH COURT 9786 NW 29TH TERRACE
SUITE 219 MIAMI, FL 33172 US
MIAMI, FL 33172 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: GABRIEL TORRES 04/27/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition Name: TORRES, GABRIEL E TORRES, GABRIEL E

 Address:
 1301 NW 89TH COURT
 Address:
 9786 NW 29TH TERRACE

 City-St-Zip:
 MIAMI, FL 33172
 City-St-Zip:
 MIAMI, FL 33172

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

 Name:
 KOJNOVER, DIEGO
 Name:
 KOJNOVER, DIEGO

 Address:
 1301 NW 89TH COURT
 Address:
 900 BAY DR, APT 412

 City-St-Zip:
 MIAMI, FL 33172
 City-St-Zip:
 MIAMI, FL 33172

Title: MGR () Delete Title: () Change () Addition

 Name:
 PRABHAKAR, MAHAVEER
 Name:

 Address:
 9595 COLLINS AVE. #909N
 Address:

 City-St-Zip:
 SURFSIDE, FL 33154
 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: GABRIEL TORRES MM 04/27/2007