

**2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L05000017141

**FILED**  
**Dec 12, 2007**  
**Secretary of State****Entity Name:** KAM CAPITAL LLC**Current Principal Place of Business:**1600 SOUTH DIXIE HWY  
F  
LAKE WORTH, FL 33460**New Principal Place of Business:****Current Mailing Address:**1600 SOUTH DIXIE HWY  
F  
LAKE WORTH, FL 33460**New Mailing Address:****FEI Number:** 32-0195107**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**AUDATE, MARIE-KETTY  
1600 SOUTH DIXIE HWY  
F  
LAKE WORTH, FL 33460 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:** DESAMOURS, ANIVENS  
**Address:** 1600 SOUTH DIXIE HWY SUITE F  
**City-St-Zip:** LAKE WORTH, FL 33460**Title:** VP (X) Delete  
**Name:** DESAMOUR, ROLAND  
**Address:** 1600 SOUTH DIXIE HWY SUITE F  
**City-St-Zip:** LAKE WORTH, FL 33460**Title:** MGRM (X) Delete  
**Name:** ALEXIS, ALEXTE  
**Address:** 1600 SOUTH DIXIE HWY, SUITE F  
**City-St-Zip:** LAKE WORTH, FL 33460**Title:** MGRM (X) Delete  
**Name:** SALOMON, EXCELLENT  
**Address:** 1600 SOUTH DIXIE HWY SUITE F  
**City-St-Zip:** LAKE WORTH, FL 33460**ADDITIONS/CHANGES:****Title:** MGRM (X) Change ( ) Addition  
**Name:** SALOMON, EXCELLENT  
**Address:** 1600 SOUTH DIXIE HWY SUITE F  
**City-St-Zip:** LAKE WORTH, FL 33460**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****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: EXCELLENT SALOMON

MGRM

12/12/2007

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