

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000055988

FILED  
Jan 12, 2009  
Secretary of State

Entity Name: CABAM 1 LLC

## Current Principal Place of Business:

10905 NW 26TH PLACE  
SUNRISE, FL 33322

## New Principal Place of Business:

4050 SW 102 AVE  
DAVIE, FL 33328

## Current Mailing Address:

10905 NW 26TH PLACE  
SUNRISE, FL 33322

## New Mailing Address:

4050 SW 102 AVE  
DAVIE, FL 33328

FEI Number: 20-3042440

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PARDO, CHRISTINE  
10905 NW 26TH PLACE  
SUNRISE, FL 33322 US

## Name and Address of New Registered Agent:

PARDO, CHRISTINE  
4050 SW 102 AVE  
DAVIE, FL 33328 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: CHRISTINE PARDO

01/12/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: PARDO, CHRISTINE  
Address: 10905 NW 26TH PLACE  
City-St-Zip: SUNRISE, FL 33322

Title: MGRM ( ) Delete  
Name: PARDO, ANDRES  
Address: 10905 NW 26TH PLACE  
City-St-Zip: SUNRISE, FL 33322

Title: MGRM ( ) Delete  
Name: PARDO, BENITA R  
Address: 1560 SW 190TH AVE.  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGRM ( ) Delete  
Name: PARDO, MAURICIO  
Address: 1560 SW 190TH AVE.  
City-St-Zip: PEMBROKE PINES, FL 33029

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: PARDO, CHRISTINE  
Address: 4050 SW 102 AVE  
City-St-Zip: DAVIE, FL 33328

Title: MGRM (X) Change ( ) Addition  
Name: PARDO, ANDRES  
Address: 4050 SW 102 AVE  
City-St-Zip: DAVIE, FL 33328

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: CHRISTINE PARDO

MGRB

01/12/2009

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