

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000081268

FILED  
Jul 09, 2007  
Secretary of State

Entity Name: CHAMCA LLC

**Current Principal Place of Business:**

2500 NW 79TH AVE  
SUITE 134  
MIAMI, FL 33122

**New Principal Place of Business:**

**Current Mailing Address:**

100 NORTH BISCAYNE BLVD  
SUITE 500  
MIAMI, FL 33132

**New Mailing Address:**

FEI Number: 20-3784822      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

MANIFACIER, LAURENT  
6300 SW 25TH STREET  
MIAMI, FL 33155 US

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

JADE ASSOCIATES, INC.  
100 NORTH BISCAYNE BLVD  
500  
MIAMI, FL 33132 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: OLIVIER SUREAU

07/09/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MANIFACIER, LAURENT  
Address: 6300 SW 25TH STREET  
City-St-Zip: MIAMI, FL 33155

Title: MGR ( ) Delete  
Name: MANIFACIER, KATIA  
Address: 6300 SW 25TH STREET  
City-St-Zip: MIAMI, FL 33155

Title: MGR ( ) Delete  
Name: DEVEZE, DAMIEN  
Address: 6300 SW 25TH STREET  
City-St-Zip: MIAMI, FL 33155

**ADDITIONS/CHANGES:**

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: DAMIEN DEVEZE

MGR

07/09/2007

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