## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L05000116310

KAMÁWI INVESTMENTS, L.L.C.



**FILED** Apr 17, 2008 08:00 A Secretary of State

Principal Place of Business

100 N. BISCAYNE BLVD, SUITE 3050

MIAMI, FL 33132

Mailing Address

100 N. BISCAYNE BLVD, SUITE 3050

MIAMI, FL 33132



## DO NOT WRITE IN THIS SPACE

03312008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number Applied For 20-3909705 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

WISNIACKI, FABIAN 1915 BRICKELL AVENUE, APT. # C-1513 MIAMI, FL 33129

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8.	. 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.	I am familiar with, and accept
	the obligations of registered agent.	

SIGNATURE

Signature, typed or original name of registered agent and title diapplicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 U00000903901 /30/08-80064--012 138.75

MANAGING MEMBERS/MANAGERS 9. MGR TITLE NAME WISNIACKI, FABIAN 1915 BRICKELL AVENUE, APT. #C-1513 STREET ADDRESS CITY-ST-7IP MIAMI, FL 33129 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited hability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:X



FABIAN WISNIACKI. MGR.