2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 06, 2009
Secretary of State

DOCUMENT# L06000021649

Entity Name: PHAMERA LLC

Current Principal Place of Business:

4426 PORPOISE DRIVE
TAMPA, FL 33617

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9715
TAMPA, FL 33674

New Mailing Address:

FEI Number: 20-4441425 **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:

CHRISTOPHER, MELVIN
4426 PORPOISE DRIVE
TAMPA, FL 33617 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:	EDWARDS, RALPH	
Address:	1402 E. NEW ORLEANS	
City-St-Zip:	TAMPA, FL 33603	
Title:	MGRM	( ) Delete
Name:	CHRISTOPHER, MELVIN	
Address:	4426 PORPOISE DRIVE	
City-St-Zip:	TAMPA, FL 33617	
Title:	MGRM	( ) Delete
Name:	SIMEON, PHANORD	
Address:	1205 E. HENRY AVENUE	
City-St-Zip:	TAMPA, FL 33604	

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: MELVIN CHRISTOPHER MGRM 05/06/2009

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