2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 05, 2007
Secretary of State

DOCUMENT# L06000058655

Entity Name: AHPEI-9, LLC.

Current Principal Place of Business:

24 SOUTH RIVER STREET
WILKES-BARRE, PA 18072

New Principal Place of Business:

Current Mailing Address:

3250 MARY STREET
SUITE 307
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CRONIG, STEVEN C
3250 MARY STREET
SUITE 307
COCONUT GROVE, FL 33133 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: AMBIT HIGH PERFORMAN, CE FUND I, LLC .
Address: 24 SOUTH RIVER STREET
City-St-Zip: WILKES-BARRE, PA 18072

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: STEVEN C. CRONIG RA 01/05/2007

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