

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000069829

Entity Name: UNIXCAM GROUP, LLC

FILED
Jan 11, 2007
Secretary of State

Current Principal Place of Business:

1188 N.W. 118TH WAY
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

1188 N.W. 118TH WAY
CORAL SPRINGS, FL 33071

New Mailing Address:

3350 SW 148TH AVE
220
MIRAMAR, FL 33027

FEI Number: 20-5297320

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRETT, ZYGMUNT
1188 N.W. 118TH WAY
CORAL SPRINGS, FL 33071 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: MGR () Delete
Name: BRETT, ZYGMUNT
Address: 1188 N.W. 118TH WAY
City-St-Zip: CORAL SPRINGS, FL 33071

Title: MGR () Delete
Name: WU, SHIXIN
Address: NO. 179-3 SUWU INDUSTRIAL DISTRICT
City-St-Zip: WUXIAN CITY, CHINA, 215128

Title: MGR () Delete
Name: GMBH, RUMBACH
Address: IN DER POINT 38 A- 4814
City-St-Zip: NEUKIRCHEN AUSTRIA,

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 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: ZYGMUNT BRETT

MGR

01/11/2007

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