

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000073272

FILED  
May 16, 2007  
Secretary of State

Entity Name: TAZCAM ENTERPRISES, LLC

## Current Principal Place of Business:

1401 BRICKELL AVE  
500  
MIAMI, FL 33131 US

## New Principal Place of Business:

## Current Mailing Address:

1401 BRICKELL AVE  
500  
MIAMI, FL 33131 US

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:

CORNELL, DAVID G  
1401 BRICKELL AVE  
500  
MIAMI, FL 33131 US

## Name and Address of New Registered Agent:

FELIPE, MARCELL  
1401 BRICKELL AVE  
500  
MIAMI, FL 33131 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: FELIPE, MARCELL

05/16/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: NORRIS, PAUL  
Address: 1401 BRICKELL AVE., SUITE 500  
City-St-Zip: MIAMI, FL 33131 US

Title: MGRM ( ) Delete  
Name: NORRIS, DENISE  
Address: 1401 BRICKELL AVE., SUITE 500  
City-St-Zip: MIAMI, FL 33131 US

Title: MGRM ( ) Delete  
Name: PICKERING, WILLIAM  
Address: 1401 BRICKELL AVE., SUITE 500  
City-St-Zip: MIAMI, FL 33131 US

Title: MGRM ( ) Delete  
Name: PICKERING, IRENE  
Address: 1401 BRICKELL AVE., SUITE 500  
City-St-Zip: MIAMI, FL 33131 US

## 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:

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: NORRIS, PAUL

MGRM

05/16/2007

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