

**2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L06000075528

**FILED**  
**Oct 24, 2007**  
**Secretary of State****Entity Name:** RISK ADJUSTMENT MANAGEMENT, LLC**Current Principal Place of Business:**1172 SOUTH DIXIE HIGHWAY  
#441 B  
CORAL GABLES, FL 33146 US**New Principal Place of Business:**7220 NW 36TH STREET  
SUITE 103  
MIAMI, FL 33166 US**Current Mailing Address:**520 BRICKELL KEY DRIVE  
APT. #906  
MIAMI, FL 33131**New Mailing Address:****FEI Number:** 20-5290418      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**JOHNSON, RONNIE D  
520 BRICKELL KEY DRIVE  
APT. #906  
MIAMI, FL 33131 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:** JOHNSON, RONNIE D  
**Address:** 520 BRICKELL KEY DRIVE, UNIT #906  
**City-St-Zip:** MIAMI, FL 33131**Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****ADDITIONS/CHANGES:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** VP ( ) Change (X) Addition  
**Name:** DIAZ, ISABEL  
**Address:** 7220 NW 36TH STREET, SUITE 103  
**City-St-Zip:** MIAMI, FL 33166 US**Title:** VP ( ) Change (X) Addition  
**Name:** OMACHONU, VINCENT  
**Address:** 7220 NW 36TH STREET, SUITE 103  
**City-St-Zip:** MIAMI, FL 33166 US

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: RONNIE D JOHNSON      MGRM      10/24/2007

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