2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000075528

Address:

City-St-Zip:

MIAMI, FL 33166 US

Entity Name: RISK ADJUSTMENT MANAGEMENT, LLC

FILED Apr 18, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7220 NW 36TH STREET SUITE 103 MIAMI, FL 33166 **Current Mailing Address: New Mailing Address:** 520 BRICKELL KEY DRIVE APT. #906 MIAMI, FL 33131 FEI Number: 20-5290418 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JOHNSON, RONNIE D 520 BRICKELL KEY DRIVE APT. #906 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete JOHNSON, RONNIE D Name: Name: Address: 520 BRICKELL KEY DRIVE, UNIT #906 Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: Title: Title: () Delete () Change () Addition Name: DIAZ, ISABEL Name: Address: 7220 NW 36TH STREET, SUITE 103 Address: City-St-Zip: MIAMI, FL 33166 US City-St-Zip: Title: () Delete Title: () Change () Addition OMACHONU, VINCENT Name: Name: 7220 NW 36TH STREET, SUITE 103

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.

Address:

City-St-Zip:

SIGNATURE: RONNIE JOHNSON **PRES** 04/18/2008