

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000081449

FILED
Apr 29, 2009
Secretary of State

Entity Name: GAMA, L.L.C.

Current Principal Place of Business:

5299 HAMMOCK DRIVE
CORAL GABLES, FL 33156

New Principal Place of Business:

Current Mailing Address:

5299 HAMMOCK DRIVE
CORAL GABLES, FL 33156

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:

REICHENBACHER, JEFFREY E
2333 BRICKELL AVE
MIAMI, FL 33129 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: MR. () Delete
Name: CORREA, GALO
Address: 5299 HAMMOCK DRIVE
City-St-Zip: CORAL GABLES, FL 33156

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 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: GALO CORREA

P

04/29/2009

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