

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000083380

FILED
Apr 25, 2007
Secretary of State

Entity Name: CAPE HORN MANAGEMENT SERVICES, LLC

Current Principal Place of Business:

1680 MICHIGAN STE 730
MIAMI BEACH, FL 33139

New Principal Place of Business:

1680 MICHIGAN AVENUE
SUITE 730
MIAMI BEACH, FL 33139

Current Mailing Address:

1680 MICHIGAN STE 730
MIAMI BEACH, FL 33139

New Mailing Address:

1680 MICHIGAN AVENUE
SUITE 730
MIAMI BEACH, FL 33139

FEI Number: 20-5473092

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

COVARRUBIAS, EDUARDO
1680 MICHIGAN AVENUE
SUITE 730
MIAMI BEACH, FL 33139 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: EDUARDO COVARRUBIAS

04/25/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: COVARRUBIAS, EDUARDO
Address: 1680 MICHIGAN AVENUE STE 730
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR () Change (X) Addition
Name: ROMERO, EDUARDO
Address: 1680 MICHIGAN AVENUE STE 730
City-St-Zip: MIAMI BEACH, FL 33139

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: EDUARDO COVARRUBIAS

MGR

04/25/2007

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