

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000099128

FILED
Feb 14, 2011
Secretary of State

Entity Name: CLAM LLC

Current Principal Place of Business:

725 NE 2ND STREET
11A
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

100 N BISCAYNE BLVD
500
MIAMI, FL 33132

New Mailing Address:

FEI Number: 80-0171643

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JADE ASSOCIATES MIAMI INC
100 N BISCAYNE BLVD
SUITE 500
MIAMI, FL 33132 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
Name: ALLOUCHE, CLAUDE
Address: 100 N BISCAYNE BLVD SUITE 500
City-St-Zip: MIAMI, FL 33132

Title: MGRM
Name: ALLOUCHE, MICHELE
Address: 100 N BISCAYNE BLVD SUITE 500
City-St-Zip: MIAMI, FL 33132

Title: MGRM
Name: ALLOUCHE, ANTHONY
Address: 100 N BISCAYNE BLVD SUITE 500
City-St-Zip: MIAMI, FL 33132

Title: MGRM
Name: ALLOUCHE, STANLEY
Address: 100 N BISCAYNE BLVD SUITE 500
City-St-Zip: MIAMI, FL 33132

Title: MGRM
Name: ALLOUCHE, CEDRIC
Address: 100 N BISCAYNE BLVD SUITE 500
City-St-Zip: MIAMI, FL 33132

Title: MGRM
Name: ALLOUCHE, HAROLD
Address: 100 N BISCAYNE BLVD SUITE 500
City-St-Zip: MIAMI, FL 33132

I hereby 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: CLAUDE ALLOUCHE

MGRM

02/14/2011

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