

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000011691

Entity Name: JOAMI HOLDINGS, LLC

FILED
Jan 18, 2008
Secretary of State

Current Principal Place of Business:

20201 E. COUNTRY CLUB DR.
APT. 1008
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

20201 E. COUNTRY CLUB DR.
APT. 1008
AVENTURA, FL 33180

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:

ROZENCWAIG, NADEL & FERRERO-CARR, LLP
301 W. HALLANDALE BEACH BOULEVARD
HALLANDALE BEACH, FL 33009 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: MGR () Delete
Name: RODITI, RAYMOND
Address: 20201 E. COUNTRY CLUB DR., APT. 1008
City-St-Zip: AVENTURA, FL 33180

Title: MGR () Delete
Name: RODITI, OLGA
Address: 20201 E. COUNTRY CLUB DR., APT. 1008
City-St-Zip: AVENTURA, FL 33180

Title: MGR () Delete
Name: RODITI, LYNN
Address: 20201 E. COUNTRY CLUB DR., APT. 1008
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RAYMOND RODITI

MGR

01/18/2008

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