

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000091993

Entity Name: MANAMI, LLC

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

7260 WEST LAGO DRIVE
CORAL GABLES, FL 33143

New Principal Place of Business:

109 WEST PAGO PAGO DRIVE
NAPLES, FL 34113

Current Mailing Address:

7260 WEST LAGO DRIVE
CORAL GABLES, FL 33143

New Mailing Address:

109 WEST PAGO PAGO DRIVE
NAPLES, FL 34113

FEI Number: 26-0880369

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIYAR, MANUEL
7260 WEST LAGO DRIVE
CORAL GABLES, FL 33143 US

Name and Address of New Registered Agent:

MIYAR, MANUEL
109 WEST PAGO PAGO DRIVE
NAPLES, FL 34113 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: MANUEL MIYAR

04/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MIYAR, MANUEL
Address: 7260 WEST LAGO DRIVE
City-St-Zip: CORAL GABLES, FL 33143

Title: MGRM () Delete
Name: MIYAR, NANCY
Address: 7260 WEST LAGO DRIVE
City-St-Zip: CORAL GABLES, FL 33143

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MIYAR, MANUEL
Address: 109 WEST PAGO PAGO DRIVE
City-St-Zip: NAPLES, FL 34113

Title: MGRM (X) Change () Addition
Name: MIYAR, NANCY
Address: 109 WEST PAGO PAGO DRIVE
City-St-Zip: NAPLES, FL 34113

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: MANUEL MIYAR

MGRM

04/20/2009

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