

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000063799

**FILED**  
**Mar 25, 2009**  
**Secretary of State**

**Entity Name:** 730 CHECKERS HIALEAH LLC

**Current Principal Place of Business:**

341 EAST 149TH STREET  
BRONX, NY 10451

**New Principal Place of Business:**

374 MCLEAN AVE  
YONKERS, NY 10705

**Current Mailing Address:**

341 EAST 149TH STREET  
BRONX, NY 10451

**New Mailing Address:**

374 MCLEAN AVE  
YONKERS, NY 10705

FEI Number: 26-0389051

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

UNITED CORPORATE SERVICES, INC.  
9200 SOUTH DADELAND BLVD., SUITE 508  
MIAMI, FL 33156 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 ( ) Delete  
Name: 730 RIVERSIDE, LLC  
Address: 341 EAST 149TH STREET  
City-St-Zip: BRONX, NY 10451

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: 730 RIVERSIDE, LLC  
Address: 374 MCLEAN AVE  
City-St-Zip: YONKERS, NY 10705

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: SABRY ASSAL

MGRM

03/25/2009

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