2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000071201

FILED
Apr 17, 2009
Secretary of State

Entity Name: STAGE TWO, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
7460 SABAL DRIVE MIAMI LAKES, FL 33014 US	

Current Mailing Address:	**New Mailing Address:**
7460 SABAL DRIVE MIAMI LAKES, FL 33014 US	

FEI Number: 26-0501747   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
MADRUGA, MARIA 7460 SABAL DRIVE MIAMI LAKES, FL 33014 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: _____

Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title:	MGRM ( ) Delete	Title: ( ) Change ( ) Addition
Name:	MADRUGA, MARIA	Name:
Address:	7460 SABAL DRIVE	Address:
City-St-Zip:	MIAMI LAKES, FL 33014 US	City-St-Zip:
Title:	MGRM ( ) Delete	Title: ( ) Change ( ) Addition
Name:	MARTINEZ-FONTS, ALICIA	Name:
Address:	7460 SABAL DRIVE	Address:
City-St-Zip:	MIAMI LAKES, FL 33014 US	City-St-Zip:
Title:	( ) Delete	Title: MGRM ( ) Change (X) Addition
Name:		Name: GOMEZ, EDDY
Address:		Address: 19454 NW 24TH PL
City-St-Zip:		City-St-Zip: PEMBROKE PINES, FL 33029
Title:	( ) Delete	Title: MGRM ( ) Change (X) Addition
Name:		Name: GOMEZ, ZAILY
Address:		Address: 19454 NW 24TH PL
City-St-Zip:		City-St-Zip: PEMBROKE PINES, FL 33029

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: MARIA MADRUGA   MGRM   04/17/2009
_____
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date