

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000003093

FILED  
Jan 19, 2009  
Secretary of State

Entity Name: EMERALD PLAZA OF STUART, L.L.C.

**Current Principal Place of Business:**

12000 BISCAYNE BLVD., #218  
NORTH MIAMI, FL 33181

**New Principal Place of Business:**

12000 BISCAYNE BLVD.,  
SUITE #218  
NORTH MIAMI, FL 33181

**Current Mailing Address:**

12000 BISCAYNE BLVD., #218  
NORTH MIAMI, FL 33181

**New Mailing Address:**

12000 BISCAYNE BLVD.,  
SUITE #218  
NORTH MIAMI, FL 33181

FEI Number: 26-1761589

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SHAPIRO, IRA R  
16375 NE 18TH AVENUE, #225  
NORTH MIAMI BEACH, FL 33162 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: KOMBLUH, ALAN M TRUSTEE  
Address: 12000 BISCAYNE BLVD., #218  
City-St-Zip: NORTH MIAMI, FL 33181

Title: MGRM ( ) Delete  
Name: FABIAN, CARL E TRUSTEE  
Address: 12000 BISCAYNE BLVD., #218  
City-St-Zip: NORTH MIAMI, FL 33181

Title: MGRM ( ) Delete  
Name: SARASOHN, SYLVAN H TRUSTEE  
Address: 12000 BISCAYNE BLVD., #218  
City-St-Zip: NORTH MIAMI, FL 33181

Title: MGRM ( ) Delete  
Name: MARSHA GREEN AS PERS, ONAL REPRESENT A TIVE  
Address: 12000 BISCAYNE BLVD., #218  
City-St-Zip: NORTH MIAMI, FL 33181

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: KORNBLUH, ALAN M TRUSTEE  
Address: 12000 BISCAYNE BLVD., #218  
City-St-Zip: NORTH MIAMI, FL 33181

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: ALAN KORNBLUH

MGRM

01/19/2009

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