

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000003093

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

**Current Principal Place of Business:**

12000 BISCAYNE BOULEVARD  
SUITE #218  
MIAMI, FL 33181

**Current Mailing Address:**

12000 BISCAYNE BOULEVARD  
SUITE #218  
MIAMI, FL 33181

**FEI Number:** 26-1761589

**Certificate of Status Desired:** No

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

SHAPIRO, IRA R  
16375 NE 18TH AVENUE, #225  
NORTH MIAMI BEACH, FL 33162 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

**Authorized Person(s) Detail :**

Title MGRM  
Name KORNBLUH, ALAN MTRUSTEE  
Address 12000 BISCAYNE BLVD., #218  
City-State-Zip: MIAMI FL 33181

Title MGRM  
Name FABIAN, CARL ETRUSTEE  
Address 12000 BISCAYNE BLVD., #218  
City-State-Zip: MIAMI FL 33181

Title MGRM  
Name SARASOHN, SYLVAN HTRUSTEE  
Address 12000 BISCAYNE BLVD., #218  
City-State-Zip: MIAMI FL 33181

Title MGRM  
Name MARSHA GREEN AS PERSONAL REPRESENTATIVE  
Address 12000 BISCAYNE BLVD., #218  
City-State-Zip: MIAMI FL 33181

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ALAN M. KORNBLUH

**MGRM**

**02/22/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date