

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000128215

**Entity Name:** CORNERSTONE R.O., LLC**Current Principal Place of Business:**2100 HOLLYWOOD BOULEVARD  
HOLLYWOOD, FL 33020**Current Mailing Address:**2100 HOLLYWOOD BOULEVARD  
HOLLYWOOD, FL 33020**FEI Number:** 46-1141078**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WOLFE, LEON  
2100 HOLLYWOOD BOULEVARD  
HOLLYWOOD, FL 33020 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            | STUART I. MEYERS FAMILY PARTNERSHIP, LTD. |
| Address         | 2100 HOLLYWOOD BOULEVARD                  |
| City-State-Zip: | HOLLYWOOD FL 33020                        |

|                 |                          |
|-----------------|--------------------------|
| Title           | MGRM                     |
| Name            | M3 ASSETS, LLC           |
| Address         | 2100 HOLLYWOOD BOULEVARD |
| City-State-Zip: | HOLLYWOOD FL 33020       |

|                 |                                     |
|-----------------|-------------------------------------|
| Title           | MGRM                                |
| Name            | JORGE LOPEZ FAMILY PARTNERSHIP, LTD |
| Address         | 2100 HOLLYWOOD BOULEVARD            |
| City-State-Zip: | HOLLYWOOD FL 33020                  |

|                 |                                       |
|-----------------|---------------------------------------|
| Title           | MGRM                                  |
| Name            | M.S. MADES FAMILY LIMITED PARTNERSHIP |
| Address         | 2100 HOLLYWOOD BOULEVARD              |
| City-State-Zip: | HOLLYWOOD FL 33020                    |

*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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JORGE LOPEZ

MGRM

02/12/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date