

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000012816

**FILED**  
**Feb 05, 2009**  
**Secretary of State**

**Entity Name:** OPH/DORAL REALTY, L.C.

**Current Principal Place of Business:**

500 EAST BROWARD BOULEVARD, SUITE 1950  
FT. LAUDERDALE, FL 33394

**New Principal Place of Business:**

**Current Mailing Address:**

500 EAST BROWARD BOULEVARD, SUITE 1950  
FT. LAUDERDALE, FL 33394

**New Mailing Address:**

FEI Number: 65-1121392

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HAMAWAY, MICHAEL  
500 EAST BROWARD BOULEVARD, SUITE 1950  
FT. LAUDERDALE, FL 33394 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: KAMELHAIR, STEVEN R  
Address: 2240 SW 70 AVE SUITE D  
City-St-Zip: DAVIE, FL 33317

**ADDITIONS/CHANGES:**

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: STEVEN R. KAMELHAIR

MGRM

02/05/2009

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