

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000009146

Entity Name: STADIUM CORNERS, LLC



Filed in Error.

Current Principal Place of Business:

490 OPA-LOCKA BLVD., STE. 20
OPA-LOCKA, FL 33054

New Principal Place of Business:

Current Mailing Address:

C/O OPA-LOCKA CDC
490 OPA-LOCKA BLVD., STE. 20
OPA-LOCKA, FL 33054

New Mailing Address:

FEI Number: 20-0623619 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LITTLE, JOHN ESQ.
3000 BISCAYNE BLVD.
SUITE 500
MIAMI, FL 33137 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: LOGAN, WILLIE
Address: 490 OPA-LOCKA BLVD., STE 20
City-St-Zip: OPA LOCKA, FL 33054

Title: MGR () Delete
Name: FELTON, MILTON
Address: 18800 NW 2 AVE
City-St-Zip: MIAMI, FL 33169

Title: MGR () Delete
Name: SABIR, NASHID
Address: 128350 NW 2 AVE., 5 FLOOR
City-St-Zip: MIAMI, FL 33169

Title: MGR () Delete
Name: PEMBRTON, DAVID
Address: 1200 S.W. 124TH TER
City-St-Zip: PEMBROKE PINES, FL 33027

Title: MGR () Delete
Name: MARTIN, MICHAEL
Address: 6418 NW 82 AVE
City-St-Zip: PARKLAND, FL 33067

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: WILLIE LOGAN

MGRM

03/26/2009

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