2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000009146

Entity Name: STADIUM CORNERS, LLC

FILED Mar 26, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
490 OPA-LOCKA BLVD. OPA-LOCKA, FL 33054			·	
Current Mailing Addres	ss:	New Mailing Address	:	
C/O OPA-LOCKA CDC 490 OPA-LOCKA BLVD. OPA-LOCKA, FL 33054	STE. 20			
FEI Number: 20-0623619	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:		
LITTLE, JOHN ESQ. 3000 BISCAYNE BLVD. SUITE 500 MIAMI, FL 33137 US		· · · · · · · · · · · · · · · · · · ·		
The above named entity in the State of Florida.	submits this statement for the p	urpose <u>of</u> changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electron	nic Signature of Registered Age	ent :	Date	

0.0.1.1.0	· 		<u> </u>	
	Electronic Signature of Registered Agent	:	Date	
Managing members/managers:		ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGRM () Delete LOGAN, WILLIE 490 OPA-LOCKA BLVD., STE 20 OPA LOCKA, FL 33054	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address; City-St-Zip;	MGR () Delete FELTON, MILTON 18800 NW 2 AVE MIAMI, FL 33169	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name; Address; City-St-Zip;	MGR () Delete SABIR, NASHID 128350 NW 2 AVE., 5 FLOOR MIAMI, FL 33169	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address; City-St-Zip;	MGR () Delete PEMBRTON, DAVID 1200 S.W. 124TH TER PEMBROKE PINES, FL 33027	_Title: Name: Address: Otty-St-Zip:	() Çhan ge () Addition	
Title: Name: Address: City-St-Zip:	MGR () Delete MARTIN, MICHAEL 6418 NW 82 AVE PARKLAND, FL 33067	Title: Name:Address: City-St-Zip:	() Change () Addition	

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: 1	WILLIE LOGAN	MGRM	03/26/2009