

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90026 041 ****55.00

DOCUMENT # L02000010794

1. Entity Name

OPA-LOCKA DEVELOPMENT, LLC



Principal Place of Business

SUITE 20
490 OPA LOCKA BLVD
OPA LOCKA, FL 33054

Mailing Address

SUITE 20
490 OPA LOCKA BLVD
OPA LOCKA, FL 33054

24065110



DO NOT WRITE IN THIS SPACE

04162004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number

20-0623662

Applied For

Not Applicable

5. Certificate of Status Desired

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

LITTLE, JOHN M ESQ
LEGAL SERVICES OF GREATER MIAMI, INC.
3000 BISCAYNE BLVD., SUITE 300
MIAMI, FL 33137

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	LOGAN, WILLIE
STREET ADDRESS	490 OPA-LOCKA BLVD STE 20
CITY-ST-ZIP	OPA LOCKA, FL 33054
TITLE	MGR
NAME	WILLIAMS-BALDWIN, STEPHANIE
STREET ADDRESS	490 OPA-LOCKA BLVD STE 20
CITY-ST-ZIP	OPA LOCKA, FL 33054
TITLE	MGR
NAME	FELTON, MILTON
STREET ADDRESS	18800 NW 2 AVE
CITY-ST-ZIP	MIAMI, FL 33169
TITLE	MGR
NAME	SABIR, NASHID
STREET ADDRESS	18350 NW 2 AVE 5 FLOOR
CITY-ST-ZIP	MIAMI, FL 33169
TITLE	MGR
NAME	PEMBERTON, DAVID
STREET ADDRESS	2520 NW 156 STREET
CITY-ST-ZIP	OPA LOCKA, FL 33054
TITLE	MGR
NAME	MARTIN, MICHAEL
STREET ADDRESS	6418 NW 82 AVE
CITY-ST-ZIP	PARKLAND, FL 33067

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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

4/28/04

(305) 687-3545

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #