

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000013807

FILED  
Feb 08, 2008  
Secretary of State

Entity Name: MIAMI-DADE INVESTMENT FUND, LLC

## Current Principal Place of Business:

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

## New Principal Place of Business:

## Current Mailing Address:

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

## New Mailing Address:

FEI Number: 75-3061832

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOGAN, WILLE  
490 OPA-LOCKA BLVD., SUITE 20  
MIAMI, FL 33054 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: MGR ( ) Delete  
Name: LOGAN, WILLIE  
Address: 490 OPA-LOCKA BLVD, STE 20  
City-St-Zip: OPA LOCKA, FL 33054

Title: M ( ) Delete  
Name: WILLIAMS-BALDWIN, STEPHANIE  
Address: 490 OPA-LOCKA BLVD., SUITE 20  
City-St-Zip: OPA LOCKA, FL 33054

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

Title: M ( ) Delete  
Name: SABIR, NASHID  
Address: 18350 NW 2 AVENUE  
City-St-Zip: MIAMI, FL 33169

Title: M ( ) Delete  
Name: PEMBERTON, DAVE  
Address: 1200 S.W. 124TH TER  
City-St-Zip: PEMBROKE PINES, FL 33027

Title: M ( ) Delete  
Name: MARTIN, MICHAEL  
Address: 6418 NW 82 AVENUE  
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:

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: STEPHANIE WILLIAMS-BALDWIN

M

02/08/2008

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