2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# L04000037854

Entity Name: MIAMI ROAD INVESTMENTS, L.L.C.

Current Principal Place of Business:

3636 NW 16TH STREET
LAUDERHILL, FL 33311

New Principal Place of Business:

Current Mailing Address:

3636 NW 16TH STREET
LAUDERHILL, FL 33311

New Mailing Address:

FEI Number: 20-1198217 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NEOCLEOUS, ALEXIS
3636 NW 16TH STREET
LAUDERHILL, FL 33311 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 (X) Delete
Name: XENOS, JOHN
Address: 2207 NE 33RD AVENUE
City-St-Zip: FT LAUDERDALE, FL 33305

Title: MGRM ( ) Delete
Name: NEOCLEOUS, ALEXIS
Address: 2207 NE 33RD AVENUE
City-St-Zip: FT LAUDERDALE, FL 33305

Title: MGRM ( ) Delete
Name: CHASE, RICHARD
Address: 471 LEXINGTON AVENUE
City-St-Zip: DAVIE, FL 33325

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change ( ) Addition
Name: NEOCLEOUS, ALEXIS
Address: 2400 NE 32ND AVE
City-St-Zip: FT LAUDERDALE, FL 33305

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: ALEXIS NEOCLEOUS MGRM 03/19/2009

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