

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jun 25, 2007 8:00 am**  
**Secretary of State**

04-24-2007 90108 022 \*\*\*\*50.00

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**DOCUMENT # L05000004494**

1. Entity Name  
**RED ROAD PLAZA, LLC**



Principal Place of Business 1355 WEST 44TH PLACE, SUITE 100 HIALEAH, FL 33012	Mailing Address 1355 WEST 44TH PLACE, SUITE 100 HIALEAH, FL 33012
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**DO NOT WRITE IN THIS SPACE**

01032007 No Chg-LLC CR2E083 (11/05)

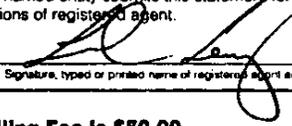
4. FEI Number 65-0108550	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

**SMITH, GARY V ESQ**  
**1230 NW 7 STREET**  
**MIAMI, FL 33125**

**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:  DATE: **4/17/07**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

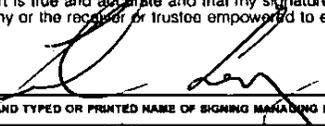
**Filing Fee is \$50.00**  
**Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM LEVY, SAM 1355 WEST 44TH PLACE, SUITE 100 HIALEAH, FL 33012
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**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  **SAM LEVY** DATE: **4/21/07** DAYTIME PHONE #: **305-825-1763**

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

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