

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000017810

FILED
Apr 17, 2009
Secretary of State

Entity Name: CLUB SHOPPING PLAZA, LLC

Current Principal Place of Business:

6301 W. COMMERCIAL BOULEVARD
TAMARAC, FL 33319

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 604413
BAY TERRACE, NY 113604413

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROEY, YALAZ
5300 SW 145TH AVENUE
SW RANCHES, FL 33330 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 () Delete
Name: YALAZ, ROEY
Address: 5300 SW 145TH AVENUE
City-St-Zip: SW RANCHES, FL 33330

Title: MGR () Delete
Name: YALAZ, DOREEN
Address: 6311 SW 130TH AVE
City-St-Zip: SW RANCHES, FL 33330

Title: MGR () Delete
Name: KLEIN, IRIS
Address: 5300 SW 145TH AVENUE
City-St-Zip: SW RANCHES, FL 33330

Title: MGR () Delete
Name: SINIA, KAREN
Address: 5300 SW 145H AVENUE
City-St-Zip: SW RANCHES, FL 33330

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:

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: ROEY YALAZ

MGRM

04/17/2009

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