


2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
May 02, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000034387 1. Entity Name CORNERSTONE STEPS, L.L.C.	
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Principal Place of Business 1521 ALTON ROAD, SUITE 407 MIAMI BEACH, FL 33139	Mailing Address 1521 ALTON ROAD, SUITE 407 MIAMI BEACH, FL 33139
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04292008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3095951	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

KARPAWICH, LISA
1521 ALTON RD
407
MIAMI BEACH, FL 33139

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 *Lisa Karpawich* DATE *4/28/08*

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

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM KARPAWICH, LISA 1521 ALTON ROAD, SUITE 407 MIAMI BEACH, FL 33139
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05/29/08-80080-003 138.75

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 *Lisa Karpawich* DATE *4/28/08* DAYTIME PHONE # *305 968 4668*

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