

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000028332

Entity Name: DIXIE PLAZA, LLC

FILED
Apr 01, 2009
Secretary of State

Current Principal Place of Business:

838 WASHINGTON STREET
HOLLYWOOD, FL 33019

New Principal Place of Business:

Current Mailing Address:

838 WASHINGTON STREET
HOLLYWOOD, FL 33019

New Mailing Address:

FEI Number: 20-4584835

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LERNER, ARIE
838 WASHINGTON STREET
HOLLYWOOD, FL 33019 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: LERNER, ARIE
Address: 838 WASHINGTON ST.
City-St-Zip: HOLLYWOOD, FL 33019

Title: MGRM () Delete
Name: LERNER, NAOMI
Address: 838 WASHINGTON ST.
City-St-Zip: HOLLYWOOD, FL 33019

Title: MGRM (X) Delete
Name: MORGENSTERN, MOSHE
Address: 2301 NW 102 WAY
City-St-Zip: PEMBROKE PINES, FL 33026

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LERNER, NAOMI
Address: 838 WASHINGTON ST.
City-St-Zip: HOLLYWOOD, FL 33019

Title: MGRM (X) Change () Addition
Name: MORGENSTERN, MOSHE
Address: 838 WASHINGTON ST.
City-St-Zip: HOLLYWOOD, FL 33019

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: NAOMI LERNER

MGRM

04/01/2009

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