

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000074879

**FILED**  
**Feb 02, 2007**  
**Secretary of State**

**Entity Name:** SHOPPING PLAZA MANAGEMENT, LLC

**Current Principal Place of Business:**

2417 NORTH UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

2417 NORTH UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33065

**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:**

GOLDMAN, BRUCE J  
2655 LE JEUNE ROAD, SUITE 816  
CORAL GABLES, FL 33134 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:  Delete  
Name:  
Address:  
City-St-Zip:

Title:  Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGMB  Change  Addition  
Name: SELCER, GABRIEL S  
Address: 2417 N. UNIVERSITY DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGMB  Change  Addition  
Name: SELCER, MINDY F  
Address: 2417 N. UNIVERSITY DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33065

I hereby certify that the information supplied with this filing does not qualify for the 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: G SELCER   D  02/02/2007

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