

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000097296

FILED
Feb 25, 2008
Secretary of State

Entity Name: MBCDC MERIDIAN PLACE, LLC

Current Principal Place of Business:

945 PENNSYLVANIA AVENUE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

945 PENNSYLVANIA AVENUE
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 20-5658169

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DATORRE, ROBERTO
945 PENNSYLVANIA AVENUE
MIAMI BEACH, FL 33139 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: DATORRE, ROBERTO
Address: 945 PENNSYLVANIA AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR (X) Delete
Name: TOMLIN, DONALD
Address: 945 PENNSYLVANIA AVENUE
City-St-Zip: MIAMI BEACH, FL 33039

Title: MGR (X) Delete
Name: KENNEDY, KARL
Address: 945 PENNSYLVANIA AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MIAMI BEACH COMMUNIT, Y DEVELOPMENT C ORP
Address: 945 PENNSYLVANIA AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

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: DONALD TOMLIN

AT

02/25/2008

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