

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000030521

FILED
Apr 26, 2009
Secretary of State

Entity Name: 2040 OPA LOCKA PLAZA, LLC

Current Principal Place of Business:

16850-112 COLLINS AVE 285
NORTH MIAMI BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

16850-112 COLLINS AVE 285
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

FEI Number: 20-8927297 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOLFE, RICHARD C ESQ.
100 S.E. SECOND STREET, SUITE 3300
MIAMI, FL 33131 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: BEHAR FAMILY LIMITED PARTNERSHIP
Address: 16850-112 COLLINS AVE 285
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: MGR () Delete
Name: BEHAR, MOISES
Address: 16850-112 COLLINS AVE 285
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: MGR () Delete
Name: BEHAR, MERCEDES
Address: 16850 112 COLLINS AVE 285
City-St-Zip: NORTH MIAMI BEACH, FL 33160

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:

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: MOISES BEHAR

MGR

04/26/2009

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