

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000029978

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: DADE CORNERS PLAZA, INC.

## Current Principal Place of Business:

17696 S.W. 8TH STREET  
MIAMI, FL 33194

## New Principal Place of Business:

16650 NW 27TH AVE  
MIAMI GARDENS, FL 33054

## Current Mailing Address:

17696 S.W. 8TH STREET  
MIAMI, FL 33194

## New Mailing Address:

P.O. BOX 560962  
MIAMI, FL 33054

FEI Number: 65-0994322

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARX, JAMES ESQ.  
2850 BRCKELL AVENUE  
MIAMI, FL 33129 US

## Name and Address of New Registered Agent:

ALMIRALL, JORGE  
16650 NW 27TH AVE  
MIAMI GARDENS, FL 33054 US

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: JORGE ALMIRALL

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ALMIRALL, JORGE  
Address: 17696 SW 8TH STREET  
City-St-Zip: MIAMI, FL 33194

Title: TSD ( ) Delete  
Name: ALMIRALL, JOSE  
Address: 17696 SW 8TH STREET  
City-St-Zip: MIAMI, FL 33194

Title: CD ( ) Delete  
Name: ALMIRALL, ISIDRO  
Address: 17696 SW 8TH STREET  
City-St-Zip: MIAMI, FL 33194

Title: D ( ) Delete  
Name: STEINBERG, ALLEN  
Address: 46 SHORE PARK ROAD  
City-St-Zip: GREAT NECK, NY 11023

Title: D ( ) Delete  
Name: RAND, ROGER  
Address: 17696 SW 8TH STREET  
City-St-Zip: MIAMI, FL 33147

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ALMIRALL, JORGE  
Address: 16650 NW 27 AVE  
City-St-Zip: MIAMI GARDENS, FL 33054

Title: TSD (X) Change ( ) Addition  
Name: ALMIRALL, JOSE  
Address: 16650 NW 27 AVE  
City-St-Zip: MIAMI, FL 33054

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JORGE ALMIRALL

DP

04/30/2009

Electronic Signature of Signing Officer or Director

Date