

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000061834

Entity Name: SAFO, LLC

FILED
Mar 14, 2007
Secretary of State

Current Principal Place of Business:

C/O EFRAT PELED
10800 BISCAYNE BLVD., SUITE 950
MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

C/O EFRAT PELED
10800 BISCAYNE BLVD., SUITE 950
MIAMI, FL 33161

New Mailing Address:

FEI Number: 52-2392205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: ETERNITY FIVE TRUST,
Address: 1201 N. ORANGE STREET #700
City-St-Zip: WILMINGTON, DE 198011186

Title: MGRM () Delete
Name: PELED, EFRAT MGR
Address: 10800 BISCAYNE BLVD #950
City-St-Zip: MIAMI, FL 33161 US

Title: MGRM () Delete
Name: JAWORSKI, DIANNE MGR
Address: 10800 BISCAYNE BLVD #950
City-St-Zip: MIAMI, FL 33161 US

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 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: EFRAT PELED

MGRM

03/14/2007

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