

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L08000117972

FILED
Apr 28, 2009
Secretary of State**Entity Name:** HAIFA INVESTMENTS, LLC**Current Principal Place of Business:**1750 NORTHWEST 124TH WAY
CORAL SPRINGS, FL 33071**New Principal Place of Business:****Current Mailing Address:**1750 NORTHWEST 124TH WAY
CORAL SPRINGS, FL 33071**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:**ZFAT, REUVEN
1750 NORTHWEST 124TH WAY
CORAL SPRINGS, FL 33071 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: REUVEN, ZFAT
Address: 1750 NW 124 WAY
City-St-Zip: CORAL SPRINGS, FL 33071Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: MRS () Change (X) Addition
Name: AVIVA, ZFAT
Address: 1750 NW 124 WAY
City-St-Zip: CORAL SPRINGS, FL 33071

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: REUVEN ZFAT

MGRM

04/28/2009

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