

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000040359

Entity Name: EMERALD14 LLC

Current Principal Place of Business:

17 HARBOUR ISLE DRIVE WEST, #405
FORT PIERCE, FL 34949

Current Mailing Address:

17 HARBOUR ISLE DRIVE WEST, #405
FORT PIERCE, FL 34949

FEI Number: 45-4889551

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name GREENFIELD, AMIR
Address 17 HARBOUR ISLE DRIVE WEST, #405
City-State-Zip: FORT PIERCE FL 34949

Title S
Name MELMAN, ANAT
Address 17 HARBOUR ISLE DRIVE WEST, #405
City-State-Zip: FORT PIERCE FL 34949

Title MGRM
Name SHAKI, DANIEL
Address 17 HARBOUR ISLE DRIVE WEST, #405
City-State-Zip: FORT PIERCE FL 34949

Title MGRM
Name LEV, MICHAEL
Address 17 HARBOUR ISLE DRIVE WEST, #405
City-State-Zip: FORT PIERCE FL 34949

Title MGRM
Name WERNER, ZIVA
Address 17 HARBOUR ISLE DRIVE WEST, #405
City-State-Zip: FORT PIERCE FL 34949

Title MGRM
Name PASCU, RAOUL
Address 17 HARBOUR ISLE DRIVE WEST, #405
City-State-Zip: FORT PIERCE FL 34949

I hereby 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 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: AMIR GREENFIELD

MGR

02/26/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date