

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000036966

**Entity Name:** ALVISTA INVESTMENTS LLC

**Current Principal Place of Business:**

20, HA NESSIIM ST.  
HOD HASHARON, 4537104

**Current Mailing Address:**

20, HA NESSIIM RD  
APPT 45  
HOD HASHARON, 4537104 IL

**FEI Number:** 80-0903436

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HARARY, LEE  
1601, EAST AMELIA ST.  
ORLANDO, FL 32803-5504 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 HARARI, ALBERT  
Address 20, HA NESSIIM RD  
APPT 45  
City-State-Zip: HOD HASHARON 4537104

Title MGR  
Name HARARI, URIEL  
Address 2 MAYANI ST,  
City-State-Zip: HOD HASHARON 45284-02

Title MANAGER  
Name HARARI, NIRA MRS.  
Address 20, HA NESSIIM RD  
APPT 45  
City-State-Zip: HOD HASHARON 4537104

*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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ALBERT HARARI

**MANAGER**

**01/20/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date