

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000036152

**Entity Name:** 5777 STRAWBERRY LAKES CIRCLE LLC

**Current Principal Place of Business:**

9 CHAIM BAR-LEV STR.  
APT 66  
RAMAT GAN, ISRAEL 5265300

**Current Mailing Address:**

9 CHAIM BAR-LEV STR.  
APT 66  
RAMAT GAN, ISRAEL 5265300 IL

**FEI Number:** 81-1593919

**Certificate of Status Desired:** No

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

SELIGMAN, ADAM R  
4420 BEACON CIRCLE  
WEST PALM BEACH, FL 33407 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 MAGAZANIC, GAD  
Address 9 CHAIM BAR-LEV STR.  
APT 66  
City-State-Zip: RAMAT GAN 5265300

*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:** GAD MAGAZANIC

**MANAGER**

**04/17/2018**

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

\_\_\_\_\_  
Date