

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000115304

**Entity Name:** 1600 WOODLAND DR ROCKLEDGE SDB LLC

**Current Principal Place of Business:**

5 KINNERET ST BSR TOWER 3  
BNEI BRAK (ISRAEL), IS 51262-37

**Current Mailing Address:**

5 KINNERET ST BSR TOWER 3  
BNEI BRAK (ISRAEL), IS 51262-37 IS

**FEI Number:** 83-0515392

**Certificate of Status Desired:** No

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

INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
STE. 204  
LOXAHATCHEE, FL 33470 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 AMBR  
Name SDB PM LLC  
Address 5 KINNERET ST. B.S.R TOWER 3  
City-State-Zip: BNEI BRAK (ISRAEL) IS 51262-37

Title MGR  
Name HANOKH, ISRAEL  
Address 5 KINNERET ST BSR TOWER 3  
City-State-Zip: BNEI BRAK (ISRAEL) IS 51262-37

Title MGR  
Name LIBERMAN, DAN  
Address 5 KINNERET ST BSR TOWER 3  
City-State-Zip: BNEI BRAK (ISRAEL) IS 51262-37

*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:** DAN LIBERMAN

MEMBER

03/08/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date