

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000011669

Entity Name: NEL HOLDINGS LLC

FILED  
Apr 25, 2008  
Secretary of State

## Current Principal Place of Business:

1550 NE MIAMI GARDENS DRIVE  
SUITE 200  
N. MIAMI BEACH, FL 33179 US

## New Principal Place of Business:

1160 E. HALLANDALE BEACH BLVD.  
HALLANDALE, FL 33009 US

## Current Mailing Address:

1550 NE MIAMI GARDENS DRIVE  
SUITE 200  
N. MIAMI BEACH, FL 33179 US

## New Mailing Address:

1160 E. HALLANDALE BEACH BLVD.  
HALLANDALE, FL 33009 US

FEI Number: 47-0868077

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PAZ, OHAD  
1550 NE MIAMI GARDENS DRIVE  
SUITE 200  
N. MIAMI BEACH, FL 33179 US

## Name and Address of New Registered Agent:

PAZ, OHAD  
1160 E. HALLANDALE BEACH BLVD.  
HALLANDALE, FL 33009 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: OHAD PAZ

04/25/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: PAZ, OHAD  
Address: 1550 NE MIAMI GARDENS DRIVE, SUITE 200  
City-St-Zip: N. MIAMI BEACH, FL 33179 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: PAZ, OHAD  
Address: 1160 E. HALLANDALE BEACH BLVD.  
City-St-Zip: HALLANDALE, FL 33009 US

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: OHAD PAZ

MGR

04/25/2008

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