

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000011187

FILED
Apr 24, 2007
Secretary of State

Entity Name: SF GROUP, L.L.C.

Current Principal Place of Business:

20533 BISCAYNE BLVD, STE 1242
AVENTURA, FL 33180

New Principal Place of Business:

1930 HARRISON STREET
602
HOLLYWOOD, FL 33020

Current Mailing Address:

20533 BISCAYNE BLVD, STE 1242
AVENTURA, FL 33180

New Mailing Address:

1930 HARRISON STREET
602
HOLLYWOOD, FL 33020

FEI Number: 20-0718405

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SERBER, DANIEL J ESQ
TURNBERRY PLAZA, STE 801
2875 NE 191ST ST
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SAIEGH, GABRIEL M
Address: 20533 BISCAYNE BLVD, STE 1242
City-St-Zip: AVENTURA, FL 33180

Title: MGRM () Delete
Name: SAIEGH, MARCELO
Address: 20533 BISCAYNE BLVD, STE 1242
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SAIEGH, GABRIEL M
Address: 1930 HARRISON STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: MGRM (X) Change () Addition
Name: SAIEGH, MARCELO
Address: 1930 HARRISON STREET
City-St-Zip: HOLLYWOOD, FL 33020

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: MARCELO SAIEGH

MGRM

04/24/2007

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