

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000027186

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Entity Name:** SAFER INVESTMENT GROUP, L.L.C.

**Current Principal Place of Business:**

7790 S.W. 133 TERRACE  
PINECREST, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

7790 S.W. 133 TERRACE  
PINECREST, FL 33156

**New Mailing Address:**

**FEI Number:** 20-0995139

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FERRADAZ, ANTONIO A  
7790 S.W. 133 TERRACE  
PINECREST, FL 33156 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  
**Name:** FOLGUEIRA, FERNANDO  
**Address:** 363 S.W. 187 TERRACE  
**City-St-Zip:** PEMBROKE PINES, FL 33029

**Title:** MGRM  
**Name:** SABATES, EDUARDO C  
**Address:** 10400 S.W. 68 AVENUE  
**City-St-Zip:** PINECREST, FL 33156

**Title:** MGRM  
**Name:** SABATES, EDUARDO N  
**Address:** 19680 N.W. 87 PLACE  
**City-St-Zip:** HIALEAH, FL 33018

**Title:** MGRM  
**Name:** ROMANO, GEORGE  
**Address:** 11111 N.W. 60 COURT  
**City-St-Zip:** HIALEAH, FL 33012

**Title:** MGRM  
**Name:** FERRADAZ, ANTONIO A  
**Address:** 7790 SW 133 TERRACE  
**City-St-Zip:** PINECREST, FL 33156

I hereby 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:** ANTONIO A FERRADAZ

MGRM

04/25/2011

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