

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000036725

FILED  
May 01, 2009  
Secretary of State

Entity Name: AFRICA ISRAEL VITRI DEVELOPERS, LLC

## Current Principal Place of Business:

3050 BISCAYNE BLVD.  
700  
MIAMI, FL 33131

## New Principal Place of Business:

C/O AFI USA, 229 WEST 43RD STREET, 10TH FL  
NEW YORK, NY 10036

## Current Mailing Address:

3050 BISCAYNE BLVD.  
700  
MIAMI, FL 33131

## New Mailing Address:

C/O AFI USA, 229 WEST 43RD STREET, 10TH FL  
NEW YORK, NY 10036

FEI Number: 20-1371072      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

MAYA, TZINDLER P.M.  
3050 BISCAYNE BLVD.,  
STE. 700  
MIAMI, FL 33137 US

## Name and Address of New Registered Agent:

INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
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: ERIC WOLZ, ASSISTANT SECRETARY  
Electronic Signature of Registered Agent

05/01/2009  
Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: OLYMPIA FLORIDA, LLC  
Address: 3050 BISCAYNE BLVD., SUITE 700  
City-St-Zip: MIAMI, FL 33131

Title: MGR (X) Delete  
Name: DVIR, RONIT  
Address: 229 WEST 43RD STREET, 10TH FLOOR  
City-St-Zip: BROOKLYN, NY 10036

Title: MGR (X) Delete  
Name: ROSEN, ROTEM  
Address: 229 WEST 43RD STREET, 10TH FLOOR  
City-St-Zip: NEW YORK, NY 10036

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: OLYMPIA FLORIDA, LLC  
Address: C/O AFI USA, 229 WEST 43RD STREET, 10TH FL  
City-St-Zip: NEW YORK, NY 10036

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: TAMIR KAZAZ      MGR      05/01/2009  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date