

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000047566

**FILED**  
**May 12, 2010**  
**Secretary of State**

**Entity Name:** AFRICA ISRAEL OF FLORIDA, LLC

**Current Principal Place of Business:**

C/O AFI USA, 229 W. 43RD STREET  
10TH FLOOR  
NEW YORK, NY 10036

**New Principal Place of Business:**

**Current Mailing Address:**

C/O AFI USA, 229 W. 43RD STREET  
10TH FLOOR  
NEW YORK, NY 10036

**New Mailing Address:**

**FEI Number:** 20-1303705      **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:**

**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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** AI FLORIDA HOLDINGS, INC  
**Address:** C/O AFI USA, 229 WEST 43RD STREET, 10TH FL  
**City-St-Zip:** NEW YORK, NY 10036 US

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: TAMIR KAZAZ

MGR

05/12/2010

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