

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088238

FILED  
Jul 30, 2007  
Secretary of State

Entity Name: TAMIR SILVERS, LLC

**Current Principal Place of Business:**

951 NE 167TH STREET  
#102  
NORTH MIAMI, FL 33162 US

**New Principal Place of Business:**

**Current Mailing Address:**

951 NE 167TH STREET  
#102  
NORTH MIAMI, FL 33054 US

**New Mailing Address:**

FEI Number: 20-1967009      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

TAMIR, OFER  
951 NE 167TH STREET  
#102  
NORTH MIAMI, FL 33054 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 ( ) Delete  
Name: TAMIR, OFER  
Address: 2241 NE 197 STREET  
City-St-Zip: N MIAMI BEACH, FL 33180

Title: MGR ( ) Delete  
Name: TAMIR, DENISE  
Address: 2241 NE 197 STREET  
City-St-Zip: N MIAMI BEACH, FL 33180

Title: MGR ( ) Delete  
Name: SILVERS, STEVEN  
Address: 19463 38 COURT  
City-St-Zip: GOLDEN BEACH, FL 33160

Title: MGR ( ) Delete  
Name: SILVERS, KAREN  
Address: 19463 38 COURT  
City-St-Zip: GOLDEN BEACH, FL 33160

**ADDITIONS/CHANGES:**

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

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

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: OFER TAMIR

PRES

07/30/2007

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