

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000091845

FILED  
Jul 03, 2006  
Secretary of State

**Entity Name:** HORIZON INVESTMENT & DEVELOPMENT, LLC

**Current Principal Place of Business:**

400 S DIXIE HIGHWAY  
#2  
HALLANDALE, FL 33009 US

**New Principal Place of Business:**

**Current Mailing Address:**

400 S DIXIE HIGHWAY  
#2  
HALLANDALE, FL 33009 US

**New Mailing Address:**

FEI Number: 82-0563252      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:**

MAYAN, ERAD  
400 S DIXIE HIGHWAY  
#2  
HALLANDALE, FL 33009 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: MGRM ( ) Delete  
Name: MAYAN, ERAD  
Address: 400 S. DIXIE HIGHWAY #2  
City-St-Zip: HALLANDALE, FL 33009 US

Title: MGR ( ) Delete  
Name: OFEK M.B. MANAGEMENT, & MAINTENANCE , INC.  
Address: OPPENHEIMER 5  
City-St-Zip: REHOVOT, ISRAEL, IS 76203 IS

**ADDITIONS/CHANGES:**

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 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: ERAD MAYAN

MGMR

07/03/2006

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