

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000091845

FILED
Feb 02, 2007
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:

20225 NE 16TH PLACE
MIAMI, FL 33179 US

Current Mailing Address:

400 S DIXIE HIGHWAY
#2
HALLANDALE, FL 33009 US

New Mailing Address:

20225 NE 16TH PLACE
MIAMI, FL 33179 US

FEI Number: 82-0563252

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MAYAN, ERAD
400 S DIXIE HIGHWAY
#2
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

MAYAN, ERAD
20225 NE 16TH PLACE
MIAMI, FL 33179 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:

02/02/2007

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: MGRM (X) Change () Addition
Name: MAYAN, ERAD
Address: 20225 NE 16TH PLACE
City-St-Zip: MIAMI, FL 33179 US

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

02/02/2007

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