

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000088700

FILED  
Jan 08, 2007  
Secretary of State

Entity Name: ELF INVESTMENT GROUP, LLC

**Current Principal Place of Business:**

3006 AVIATION AVENUE  
SUITE 2A  
COCONUT GROVE, FL 33133 US

**New Principal Place of Business:**

13081 SW 133 COURT  
MIAMI, FL 33186 US

**Current Mailing Address:**

3006 AVIATION AVENUE  
SUITE 2A  
COCONUT GROVE, FL 33133 US

**New Mailing Address:**

9415 SW 144 STREET  
MIAMI, FL 33176 US

FEI Number: 20-3460665

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

FLORIDA CORPORATE SERVICES, LLC  
3006 AVIATION AVENUE  
2A  
COCONUT GROVE, FL 33133 US

**Name and Address of New Registered Agent:**

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: EDEN, ADIB  
Address: 9415 S.W. 144 STREET  
City-St-Zip: MIAMI, FL 33176

Title: MGRM ( ) Delete  
Name: LEON, LUIS  
Address: 7245 S.W. 105 TERRACE  
City-St-Zip: MIAMI, FL 33156

Title: MGRM ( ) Delete  
Name: FERNANDEZ, OSCAR  
Address: 11521 S.W. 98 COURT  
City-St-Zip: MIAMI, FL 33176

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: LEON, LUIS  
Address: 13081 SW 133 COURT  
City-St-Zip: MIAMI, FL 33186

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: ADIB EDEN

MR.

01/08/2007

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