

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000058533

FILED
Feb 13, 2008
Secretary of State

Entity Name: EYAL FAMILY LLC

Current Principal Place of Business:

215 HERON ST
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

Current Mailing Address:

215 HERON ST
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KANE, STEVEN H
557 N WYMORE ROAD
100
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

EYAL, VICTOR A
215 HERON ST
ALTAMONTE SPRINGS, FL 32701 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: VICTOR EYAL

02/13/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: EYAL, VICTOR
Address: 215 HERON STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: MGRM () Delete
Name: EYAL, RONIT
Address: 215 HERON STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: MGRM () Delete
Name: KANE, STEVEN H
Address: 557 N WYMORE ROAD STE 100
City-St-Zip: MAITLAND, FL 32751

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:

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: VICTOR A EYAL

RA

02/13/2008

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