

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000005473

**FILED**  
**Apr 29, 2007**  
**Secretary of State**

**Entity Name:** EL-AD SAWGRASS MANAGEMENT LLC

**Current Principal Place of Business:**

7975 N.W. 154TH STREET, SUITE 200  
MIAMI LAKES, FL 33016

**New Principal Place of Business:**

1301 INTERNATIONAL PKWY; STE 200  
SUNRISE, FL 33323

**Current Mailing Address:**

7975 N.W. 154TH STREET, SUITE 200  
MIAMI LAKES, FL 33016

**New Mailing Address:**

1301 INTERNATIONAL PKWY; STE 200  
SUNRISE, FL 33323

**FEI Number:** 20-5550161

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AMERICAN INFORMATION SERVICES, INC.  
ONE S.E. 3RD AVENUE, 28TH FLOOR  
MIAMI, FL 33131 US

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

NRAI SERVICES, INC.  
2731 EXECUTIVE DRIVE  
SUITE 4  
WESTON, FL 33331 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: EDWARD SALDANA

04/29/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: HACKMON, ORLY  
Address: 575 MADISON AVENUE 22ND FLOOR  
City-St-Zip: NEW YORK, NY 10022

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: DANIELL, ORLY  
Address: 575 MADISON AVENUE 22ND FLOOR  
City-St-Zip: NEW YORK, NY 10022

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: SHAOUL MISHAL

P

04/29/2007

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