

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000002307

**Entity Name:** DAVID'S ART, LLC

**Current Principal Place of Business:**

2860 CENTER PORT CIRCLE  
POMPANO BEACH, FL 33064

**Current Mailing Address:**

2860 CENTER PORT CIRCLE  
POMPANO BEACH, FL 33064 US

**FEI Number:** 26-4363186

**Certificate of Status Desired:** No

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

FORMAN, ROBERT SESQUIRE  
2101 WEST COMMERCIAL BOULEVARD  
SUITE 4100  
FT LAUDERDALE, FL 33309 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

**Authorized Person(s) Detail :**

Title MGR  
Name NOTES, ERAN  
Address 2860 CENTER PORT CIRCLE  
City-State-Zip: POMPANO BEACH FL 33064

Title MGR  
Name HARARI, DAVID  
Address 2860 CENTER PORT CIRCLE  
City-State-Zip: POMPANO BEACH FL 33064

Title MGRM  
Name SADIK, OFER  
Address 2860 CENTER PORT CIRCLE  
City-State-Zip: POMPANO BEACH FL 33064

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** OFER SADIK

**MGRM**

**04/13/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date