2005 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 05, 2005 8:00 am Secretary of State **DOCUMENT # 335021** 1. Entity Name 04-05-2005 90049 009 ***150.00 AVENTURA LAND AND DEVELOPMENT CORPORATION Principal Place of Business Mailing Address C/O THE BROADSTONE GROUP, INC. 156 WEST 56TH ST, SUITE 1604 C/O THE BROADSTONE GROUP, INC. 156 WEST 56TH ST, SUITE 1604 **NEW YORK NY 10019-3878** NEW YORK NY 10019-3878 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 90-0053416 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BERGER SINGERMAN, PA Street Address (P.O. Box Number is Not Acceptable) 350 E LAS OLAS BLVD **SUITE 1000** FT. LAUDERDALE FL 33301 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE -Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DPT THILE ☐ Delete TITLE Change Addition LOPATER, LAWRENCE NAME NAME C/O BROADSTONE GROUP 888 SEVENTH AVE, SUIT STREET ADDRESS STREET ADDRESS 156 West 56th Street, Suite 1604 CITY-ST-ZIP NEW YORK NY 10106 CITY-ST-ZIP New York, NY 10019 DVS TITLE TITLE Change Delete Addition NAME BORY, JUDITH C/O BROADSTONE GROUP 888 SEVENTH AVE, SUIT STREET ADDRESS STREET ADDRESS 156 West 56th Street, Suite 1604 NEW YORK NY 10106 CITY-ST-ZIP CITY-ST-ZIP New York, NY 10019 THUE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

Judith Bory

SIGNATURE:

CITY-ST-ZIP