


**2006 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2006**

**FILED  
Jan 18, 2006 08:00 AM  
Secretary of State**

DOCUMENT # A98000001129  
1. Entity Name  
AVENTURA LAND INVESTMENTS, L.P.



Principal Place of Business 2777 N.E. 183RD STREET AVENTURA, FL 33160	Mailing Address 2777 N.E. 183RD STREET AVENTURA, FL 33160
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01122006 No Chg-LP CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 85-0833320	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
  
C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$500.00  
After May 1, 2006, Fee will be \$900.00**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	P98000040016 AVENTURA LAND MANAGEMENT, INC. 900 WEST JACKSON BLVD., 8TH FLOOR CHICAGO, IL 60607
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STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: D. Tran 1/12/06 312-738-1717  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #