

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 20, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L03000009498**

1. Entity Name  
 1110 BRICKELL VENTURE PARTNERS, LLC



Principal Place of Business  
 1300 BRICKELL AVE  
 MIAMI, FL 33131

Mailing Address  
 1300 BRICKELL AVE  
 MIAMI, FL 33131

**DO NOT WRITE IN THIS SPACE**



01232006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
 45-0507880

Applied For  
 Not Applicable

5. Certificate of Status Desired

**\$5.00** Additional  
 Fee Required

**6. Name and Address of Current Registered Agent**

SANCHEZ, MILAGROS  
 1300 BRICKELL AVE  
 MIAMI, FL 33131

**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

*[Handwritten Signature]*  
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
 Due by May 1, 2006**

**9. MANAGING MEMBERS/MANAGERS**

TITLE: MGR  
 NAME: FORTUNE INTERNATIONAL MANAGEMENT, INC.  
 STREET ADDRESS: 1300 BRICKELL AVE  
 CITY-ST-ZIP: MIAMI, FL 33131

TITLE:  
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 STREET ADDRESS:  
 CITY-ST-ZIP:

111100438782  
 09/02/06-80014-016 50.00

**DO NOT WRITE  
 IN THIS SPACE**

11. 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 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:

*[Handwritten Signature]*

*Edgardo A. Defortuosa, Pres. of Fortune Int'l Mgmt. (305) 351-1000*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #