


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 26, 2004 8:00 am
Secretary of State

02-26-2004 90203 046 ****50.00

DOCUMENT # L03000005700

1. Entity Name
 LA ESTANCIA AVENTURA, L.L.C.



Principal Place of Business
~~3440 HOLLYWOOD BLVD., STE 360~~
~~HOLLYWOOD, FL 33021~~

Mailing Address
 3440 HOLLYWOOD BLVD., STE 360
 HOLLYWOOD, FL 33021

11014003

2. Principal Place of Business
 18851 NE 29th Ave
 Suite, Apt. #, etc.
 900

3. Mailing Address
 18851 NE 29th Ave
 Suite, Apt. #, etc.
 900



01082004 Chg-LLC CR2E083 (10/03)

City & State
 AVENTURA, FL

City & State
 AVENTURA, FL

Zip
 33180

Country
 USA

Zip
 33180

Country
 USA

4. FEI Number
 47-0910339

Applied For
 Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 ROTH, LEONARD A ESQ
 ROTH ROUSSO & DARRACH, P.A.
~~3440 HOLLYWOOD BLVD., SUITE 360~~
~~HOLLYWOOD, FL 33021~~

7. Name and Address of New Registered Agent
 Name
 ROTH LEONARDO A. ESQ
 Street Address (P.O. Box Number is Not Acceptable)
 18851 NE 29th Ave. Suite 900
 City
 AVENTURA FL Zip Code
 33180

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 *AK* LEONARDO A. ROTH, Esq. 2/23/04
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, 2004

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KOJUSNER, CLAUDIO 3440 HOLLYWOOD BLVD., SUITE 360 HOLLYWOOD, FL 33021 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 18851 NE 29th Ave Suite 900 AVENTURA FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HORIGIAN, FERNANDO 3440 HOLLYWOOD BLVD., SUITE 360 HOLLYWOOD, FL 33021 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 18851 NE 29th Ave Suite 900 AVENTURA FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KOJUSNER, GASTON 3440 HOLLYWOOD BLVD., SUITE 360 HOLLYWOOD, FL 33021 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 18851 NE 29th Ave Suite 900 AVENTURA FL 33180
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. 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 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: *Fernando Horigian* MGRM 2/23/04 786279-0000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #