## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000012880

City-St-Zip:

AVENTURA, FL 33180

Entity Name: THE VENTURE UNIT # 206 INC

FILED Apr 19, 2009 Secretary of State

Current Pr	incipal Place	of Business:	New Princ	New Principal Place of Business:		
2775 NE 18 206 WEST AVENTUR	37 ST A, FL 33180	US				
Current Ma	ailing Addres	s:	New Maili	New Mailing Address:		
2775 NE 18 206 WEST AVENTUR	37 ST A, FL 33180	US				
FEI Number:	20-8546978	FEI Number Applied For ( )	FEI Number Not App	icable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
DE FERIA, 2775 NE 18 206 WEST	37 ST			BENMERGUI, ISAAC 1045 KANE CONCOURSE 209		
AVENTURA, FL 33180 US				BAY HARBOR ISLANDS, FL 33154 US		
The above in the State		ubmits this statement for the p	ourpose of changing i	ts registered	d office or registered agent, or both,	
SIGNATUR	RE: ISAAC BE	NMERGUI		04/19/2009		
	Electroni	c Signature of Registered Ag	ent		Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).				
OFFICERS	AND DIRECT	rors:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () LITMAN DE ARA 2775 NE 187 ST AVENTURA, FL	# 206 WEST	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () ARAZI, MARCO 2775 NE 187 ST AVENTURA, FL	# 206 WEST	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address:	TR () ARAZI, BETINA 2775 NE 187 ST	Delete # 206 WEST	Title: Name: Address:	TR ARAZI, FABI 2775 NE 18	(X) Change()Addition IANA 7 ST # 206 WEST	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip: AVENTURA, FL 33180

SIGNATURE: MARTHA ARAZI P 04/19/2009