

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jan 30 1997 8:00am
Secretary of State

DOCUMENT # **H40879** (9)

1. Corporation Name
AVENTURA L-1 A CORP.



Principal Place of Business
**C/O THE BROADSTONE GROUP, INC
888 7TH AVE. STE 3400
NEW YORK NY 10106**

Mailing Address
**C/O THE BROADSTONE GROUP, INC
888 7TH AVE. STE 3400
NEW YORK NY 10106-0894**

3. Date Incorporated or Qualified **02/04/1985** 3a. Date of Last Report **05/01/1996**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

10106-0199

30

4. FEI Number

59-2491577

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BERGER, MITCHELL W.
100 N.E. 3RD AVENUE
SUITE 400
FORT LAUDERDALE FL 33131**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

DV

☐ DELETE

NAME

**BORY, JUDITH
888 SEVENTH AVE., SUITE 3400
NEW YORK NY 10106-0199**

STREET ADDRESS

CITY-ST-ZIP

TITLE

DP

☐ DELETE

NAME

**MOLLOD, MICHAEL
888 7TH AVE STE 3400
NEW YORK NY**

STREET ADDRESS

CITY-ST-ZIP

TITLE

DTAS

☐ DELETE

NAME

**COLLINS, KEVIN
888 SEVENTH AVE., SUITE 3400
NEW YORK NY**

STREET ADDRESS

CITY-ST-ZIP

TITLE

S

☐ DELETE

NAME

**SPOTO, ANTONINA L
888 7TH AVE STE 3400
NEW YORK NY**

STREET ADDRESS

CITY-ST-ZIP

TITLE

~~D~~

☒ DELETE

NAME

**~~WALLAGE, PAUL F.
888 7TH AVE STE 3400
NEW YORK NY 10106-0100~~**

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Judith Bory
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/9/97

Date

212-333-2100

Daytime Phone #

00000000

CR2E034 (9/96)