


**2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**May 03, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # L00000002055**

1. Entity Name  
 1401 BRICKELL, LLC



Principal Place of Business 255 ALHAMBRA CIRCLE SUITE 1100 CORAL GABLES, FL 33134	Mailing Address 255 ALHAMBRA CIRCLE SUITE 1100 CORAL GABLES, FL 33134
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**DO NOT WRITE IN THIS SPACE**



02172004No Chg-LLC CR2E083 (10/03)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

BLUMBERG, PHILIP  
 255 ALHAMBRA CIRCLE  
 SUITE 1100  
 CORAL GABLES, FL 33134

**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 \_\_\_\_\_  
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**

U00000152573  
 05/04/04-80093-005 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR AMERICAN VENTURES PROPERTY FUND-I LTD 255 ALHAMBRA CIRCLE STE 1100 CORAL GABLES, FL 33134
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

American Ventures Property Fund-I, Ltd Sole Member and Manager, AVRI Trust, Managing General Partner

**SIGNATURE:**  Philip F. Blumberg, Authorized Agent April 27, 2004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #