

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000022266

FILED  
Apr 03, 2007  
Secretary of State

Entity Name: AVENTURA CHARTER SCHOOLHOUSE DEVELOPERS LLC

**Current Principal Place of Business:**

10511 NORTH KENDALL DRIVE  
MIAMI, FL 33176 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 520682  
MIAMI, FL 33152 US

**New Mailing Address:**

FEI Number: 65-1160057

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LASARTE, FELIX ESQ.  
8500 SW 8TH STREET, SUITE 238  
MIAMI, FL 33144 US

**Name and Address of New Registered Agent:**

LASARTE, FELIX ESQ.  
10511 NORTH KENDALL DRIVE  
SUITE C 205  
MIAMI, FL 33176 US

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.

SIGNATURE:

04/03/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MACHADO, LUIS  
Address: P.O. BOX 520682  
City-St-Zip: MIAMI, FL 33152 US

Title: MGRM ( ) Delete  
Name: AVINO, JOAQUIN  
Address: 1500 SAN REMO AVENUE SUITE 420  
City-St-Zip: CORAL GABLES, FL 33146 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: AVINO, JOAQUIN  
Address: P.O. BOX 831766  
City-St-Zip: MIAMI, FL 33283 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: LUIS MACHADO

MGRM

04/03/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date