


**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 27, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # L02000027284**

1. Entity Name  
**CULBEK AVENTURA, LLC**



Principal Place of Business <b>20281 E. COUNTRY CLUB DRIVE APT 2304 AVENTURA, FL 33180 US</b>	Mailing Address <b>20281 E. COUNTRY CLUB DRIVE APT 2304 AVENTURA, FL 33180 US</b>
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01072005No Chg-LLC CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>NOT APPLICABLE</b>	Applied For <input type="checkbox"/> 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

**KORN, GARY  
20801 BISCAYNE BOULEVARD  
SUITE 501  
AVENTURA, FL 33180**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when retreating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00  
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CULA, LEON 20281 E. COUNTRY CLUB DRIVE AVENTURA, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CULA, JOSEPH 20281 E. COUNTRY CLUB DRIVE AVENTURA, FL 33180
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01/28/05-80052-015 50.00

**DO NOT WRITE  
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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.

**SIGNATURE:** *Joseph Cula* **JOSEPH CULA, MGR** 01/21/05 3059361414  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #