

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000001894

**FILED**  
**Feb 06, 2010**  
**Secretary of State**

**Entity Name:** VENTURE RESEARCH INSTITUTE, LLC

**Current Principal Place of Business:**

16853 NE 2ND AVE., SUITE 400  
NORTH MIAMI BEACH, FL 33162

**New Principal Place of Business:**

**Current Mailing Address:**

16853 NE 2ND AVE., SUITE 400  
NORTH MIAMI BEACH, FL 33162

**New Mailing Address:**

**FEI Number:** 43-1999009

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MENKHAUS, DAVID J  
1900 GLADES RD ST 401  
BOCA RATON, FL 33431 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: BASSAN, ISAAC M.D.  
Address: 16853 NE 2 AVE. ST 400  
City-St-Zip: NMB, FL 33162

Title: MGR  
Name: BLOOM, MICHAEL M.D.  
Address: 16853 NE 2 AVE ST 400  
City-St-Zip: NMB, FL 33162

I hereby 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: ISAAC BASSAN

MGR

02/06/2010

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