

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 04, 2006 8:00 am
Secretary of State

04-04-2006 90010 002 ****50.00

DOCUMENT # L03000010696 1. Entity Name VENUS INVESTMENTS LLC					
Principal Place of Business 600 BRICKELL AVENUE SUITE 400 MIAMI, FL 33131			Mailing Address 600 BRICKELL AVENUE SUITE 400 MIAMI, FL 33131		
2. Principal Place of Business 200 S. Biscayne Blvd. Suite, Apt. #, etc. Suite 3800		3. Mailing Address 200 S. Biscayne Blvd. Suite, Apt. #, etc. Suite 3800			
City & State Miami, FL		City & State Miami, FL		4. FEI Number 20-0277030	
Zip 33131		Country U.S.A.		5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent GUTIERREZ, RENALDY J 601 BRICKELL KEY DRIVE SUITE 201 MIAMI, FL 33131				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 reappointing) _____ DATE _____					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HOWARD, HENRY B 600 BRICKELL AVENUE, SUITE 400 MIAMI, FL 33131 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Howard, Henry B. 200 S. Biscayne Blvd. Miami, FL 33131 ☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS GUTIERREZ, RENALDY J 601 BRICKELL KEY DRIVE, SUITE 201 MIAMI, FL 33131 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SAME ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, 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 808, Florida Statutes.					
SIGNATURE _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		16 MARCH 06 786 777 0300 x7103 Date Daytime Phone #			

HENRY B. HOWARD