2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000013143

Entity Name: JOINT ADVENTURE LLC

FILED Apr 25, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O ALAN COHN, ESQ. C/O ALAN COHN, ESQ.

1152 NORTH UNÍVERSITY DRIVE, SUITE 201 1152 N. UNIVERSITY DRIVE, SUITE 201

PEMBROKE PINES, FL 33024 PEMBROKE PINES, FL 33024

Current Mailing Address: New Mailing Address:

C/O ALAN COHN, ESQ. C/O ALAN COHN, ESQ.

1152 NORTH UNIVERSITY DRIVE, SUITE 201 1152 N. UNIVERSITY DRIVE, SUITE 201

PEMBROKE PINES, FL 33024 PEMBROKE PINES, FL 33024

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

COHN, ALAN ESQ. COHN, ALAN ESQ.

1152 NORTH UNIVERSITY DRIVE, SUITE 201 1152 N. UNIVERSITY DRIVE, SUITE 201 PEMBROKE PINES, FL 33024 US PEMBROKE PINES, FL 33024 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: 04/25/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 COHN, ALAN ESQ
 Name:

 Address:
 1152 N. UNIVERSITY DRIVE, SUITE 201
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33024
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 GOLDSTEIN, HOWARD
 Name:

 Address:
 2503 N. RIVERSIDE DRIVE
 Address:

 City-St-Zip:
 POMPANO BEACH, FL 33062
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALAN W. COHN MGRM 04/25/2005