

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000039700

Entity Name: VENTURE 521 WEST, L.L.C.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

542 WASHINGTON AVE.
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

542 WASHINGTON AVE.
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 20-0843379

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS G. SHERMAN, ESQ, P.A.
218 ALMERIA AVE.
CORAL GABLES, FL 33134 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/MEMBERS:

Title: MGRM () Delete
Name: DI GIROLAMO, NICOLA P
Address: VIA FILIPPO CORRIDONI 23
City-St-Zip: 00195 ROME-ITALY,

Title: MGRM () Delete
Name: SCATTARREGGIA, PAOLO
Address: 18671 COLLINS AVE, APT 1501
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES:

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

Title: () Change () Addition
Name:
Address:
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: SCATTARREGGIA PAOLO

MGRM

04/29/2005

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