2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000006712

1. Entity Name

A.V.Y. INVESTMENT, LLC



Principal Place of Business

61 W COLONIAL DR ORLANDO, FL 32801 Mailing Address

61 W COLONIAL DR ORLANDO, FL 32801

FILED Apr 26, 2006 8:00 am Secretary of State

04-26-2006 90149 022 ****50.00



03282006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For
20-0645995	Γ	Not Applicable
5. Certificate of Status Desired	\$5.0	0 Additional

Fee Required

6. Name and Address of Current Registered Agent

SHOEMAKER, JOHN B 61 W COLONIAL DR ORLANDO, FL 32801

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	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	(DATE	_
SIGNATUR	RE				
	gations of registered agent.				
8. The abo	ove named entity submits this statement for the purpose of chang	ing its registered office or registered agent, or bott	 in the State of Florida. 	I am familiar with, and as	ccept

Filing Fee is \$50.00 Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KODSI, ALBERT 61 W COLONIAL DR ORLANDO, FL 32801	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
1 11. I hereby	certify that the information supplied with this filing does not qualify for the ex-	emptions contained in Chapter 119, Florida Statutes, Lifuthar codif

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGUNG MEMBER, OR AUTHORIZED REPRESENTATIVE

Albert Kodsi

3/31/06

(407) 294-7931

Date