

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031145

FILED
Apr 26, 2005
Secretary of State

Entity Name: AVILA ASSOCIATES GROUP, LLC

Current Principal Place of Business:

11258 NW 47 LANE
MIAMI, FL 33178

New Principal Place of Business:

9737 NW 41 ST
#615
MIAMI, FL 33178 US

Current Mailing Address:

11258 NW 47 LANE
MIAMI, FL 33178

New Mailing Address:

9737 NW 41 ST
#615
MIAMI, FL 33178 US

FEI Number: 65-1247936

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, PETER M
2450 S2 137TH AVENUE, SUITE 234
MIAMI, FL 33175 US

Name and Address of New Registered Agent:

CABANAS & ASSOCIATES, P.A.
10520 NW 26 ST
C 201
DORAL, FL 33172 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: JOSEPH F. CABANAS

04/26/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: DI RAUSO, LUIS
Address: 11258 NW 47 LANE
City-St-Zip: MIAMI, FL 33178

Title: MGRM () Delete
Name: SANTORO, PIERANGELA
Address: 11258 NW 47 LANE
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DI RAUSO, LUIS
Address: 10556 NW 26 ST - D101
City-St-Zip: DORAL, FL 33172 US

Title: MGRM (X) Change () Addition
Name: SANTORO, PIERANGELA
Address: 10556 NW 26 ST - D 101
City-St-Zip: DORAL, FL 33172 US

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: LUIS DI RAUSO

MGRM

04/26/2005

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