

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000111215

Entity Name: AVENTURA CARS LLC

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

3330 NE 190TH ST.
2210
AVENTURA, FL 33180

New Principal Place of Business:

20725 NE 16 AVE
A-20
MIAMI, FL 33179

Current Mailing Address:

3330 NE 190TH ST.
2210
AVENTURA, FL 33180

New Mailing Address:

3332 NE 190TH ST.
2210
AVENTURA, FL 33180

FEI Number: 20-5941418

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GROBMAN, RONALD MR.
3330 NE 190TH ST.
2210
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

GROBMAN, RONALD MR.
3332 NE 190TH ST.
2210
AVENTURA, FL 33180 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:

04/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RONALD, GROBMAN MR.
Address: 3330 NE 190TH ST. APT 2210
City-St-Zip: AVENTURA, FL 33180

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RONALD, GROBMAN MR.
Address: 3332 NE 190TH ST. APT 2210
City-St-Zip: AVENTURA, FL 33180

Title: MGRM () Change (X) Addition
Name: LISSETTE, LUDMIR MRS.
Address: 3332 NE 190TH ST. APT 2210
City-St-Zip: AVENTURA, FL 33180

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LISSETTE LUDMIR

MGRM

04/20/2009

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