

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000006804

**FILED**  
**Jan 25, 2011**  
**Secretary of State**

**Entity Name:** ENVENTURE PARTNERS LLC

**Current Principal Place of Business:**

2000 PONCE DE LEON BOULEVARD  
SUITE 600  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

2000 PONCE DE LEON BOULEVARD  
SUITE 600  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

**FEI Number:** 20-8257221

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PINTO, CARLOS J  
3790 MAIN HIGHWAY  
MIAMI, FL 33133 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/MANAGERS:**

**Title:** MGRM  
**Name:** PINTO, CARLOS J  
**Address:** 3790 MAIN HIGHWAY  
**City-St-Zip:** MIAMI, FL 33133 US

**Title:** MGRM  
**Name:** FERNANDES, BERNARDO T  
**Address:** 18 WINTHROP AVENUE  
**City-St-Zip:** MARBLEHEAD, MA 01945 US

I hereby 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:** CARLOS J PINTO

MGRM

01/25/2011

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