## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000026512

RICAURTE, DOLLY

SEYMOUR, CT 06483

27 DAVIS ROAD

Name:

Address:

City-St-Zip:

Entity Name: ADVENTURE ADVERTISEMENT LLC

FILED Aug 11, 2008 Secretary of State

Current P	rincipal Place of Business:	New Principal	Place of Business:	
	. 174TH TERRACE #104 KES, FL 33015 US			
Current Mailing Address:		New Mailing A	New Mailing Address:	
	. 174TH TERRACE #104 KES, FL 33015 US			
	: FEI Number Applied For() ice with s. 607.193(2)(b), F.S., the limited liability c I Address of Current Registered Agent:	• •		
ivallie allu	Address of Current Registered Agent.	Name and Add	less of New Registered Agent.	
13302 WIN SUITE A-1	STATES CORPORATION AGENTS, INC. NDING OAKS BLVD 100 L 336123425 US			
	e named entity submits this statement for the e of Florida.	e purpose of changing its reg	gistered office or registered agent, or both	
SIGNATU	RE:			
	Electronic Signature of Registered A	gent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGRM () Delete GAVIRIA, ALEJANDRO R 7321 N.W. 174TH TERRACE #104 MIAMI LAKES, FL 33015 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete ROMERO, JOSE M 7321 N.W. 174TH TERRACE #104 MIAMI LAKES, FL 33015 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete CORRALES, MARTHA L 7321 N.W. 174TH TERRACE #104 MIAMI LAKES, FL 33015 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	MGRM ( ) Delete	Title:	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ALEJANDRO R. GAVIRIA MGR 08/11/2008