

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000071573

**FILED**  
**Apr 13, 2010**  
**Secretary of State**

**Entity Name:** AVENTURA PROFESSIONAL SUITES, LLC

**Current Principal Place of Business:**

17071 W. DIXIE HIGHWAY  
NORTH MIAMI BEACH, FL 33160 US

**New Principal Place of Business:**

**Current Mailing Address:**

17071 W. DIXIE HIGHWAY  
NORTH MIAMI BEACH, FL 33160 US

**New Mailing Address:**

**FEI Number:** 26-3050249

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROSEN, PHILIP C  
8551 W. SUNRISE BOULEVARD  
SUITE 208  
FORT LAUDERDALE, FL 33322 US

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

ROSEN, PHILIP C  
17071 W DIXIE HWY  
NORTH MIAMI BEACH, FL 33160 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: PHILIP C ROSEN

04/13/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MACKEN, LILLIAN  
Address: 17071 W. DIXIE HIGHWAY  
City-St-Zip: NORTH MIAMI BEACH, FL 33160 US

Title: MGRM  
Name: MACKEN, JODI  
Address: 17071 W. DIXIE HIGHWAY  
City-St-Zip: NORTH MIAMI BEACH, FL 33160 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: LILLIAM MACKEN

MGRM

04/13/2010

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