

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000100237

FILED
May 11, 2009
Secretary of State

Entity Name: AVENTURA CONDO 2205 LLC

Current Principal Place of Business:

4301 COLLINS AVENUE
APT. 208
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

4301 COLLINS AVENUE
APT. 208
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WEISER, SHERRY
4301 COLLINS AVENUE
APT. 208
MIAMI BEACH, FL 33140 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WEISER, SHERRY
Address: 4301 COLLINS AVENUE
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGRM (X) Delete
Name: GLATTER, YAAKOV
Address: 1275 E29TH STREET
City-St-Zip: BROOKLYN, NY 11210

Title: MGRM (X) Delete
Name: GOTTLIEB, DAVID
Address: 1327 E31ST STREET
City-St-Zip: BROOKLYN, NY 11210

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SHERRY WEISER

MGRM

05/11/2009

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