

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L95000000547

FILED
Apr 07, 2005
Secretary of State

Entity Name: VENEFL0, L.C.

Current Principal Place of Business:

15011 S.W. 43RD TERRACE
MIAMI, FL 33185

New Principal Place of Business:

15011 S.W. 43RD TERRACE
MIAMI, FL 33185 US

Current Mailing Address:

801 BRICKELL WAY BLVD
#805
MIAMI, FL 33131

New Mailing Address:

801 BRICKELL KEY BLVD
2504
MIAMI, FL 33131 US

FEI Number: 65-0689478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OTTOLINO, GIUSEPPE
15011 S.W. 43RD TERRACE
MIAMI, FL 33185 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/MEMBERS:

Title: MGR () Delete
Name: OTTOLINO, GIUSEPPE
Address: 15011 S.W. 43RD TERRACE
City-St-Zip: MIAMI, FL 33185

Title: MEM () Delete
Name: OTTOLINO, YADIRA
Address: 15011 S.W. 43RD TERRACE
City-St-Zip: MIAMI, FL 33185

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: OTTOLINO, GIUSEPPE
Address: 15011 S.W. 43RD TERRACE
City-St-Zip: MIAMI, FL 33185 US

Title: MGRM (X) Change () Addition
Name: OTTOLINO, YADIRA
Address: 15011 S.W. 43RD TERRACE
City-St-Zip: MIAMI, FL 33185 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: OTTOLINO YADIRA

MGRM

04/07/2005

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