

File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 OCT 20 AM 8:23

**FILING FEE \$ 188.75** **Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee**  
**Make Check Payable To: FLORIDA DEPARTMENT OF STATE**

1. Name and Mailing Address  
of Limited Liability Company

**DOCUMENT # L97000001313**

K.A. AVENTURA, L.C.  
790 EAST BROWARD BLVD., SUITE 400  
FORT LAUDERDALE FL 33301

1a. Principal Place of Business Address

790 EAST BROWARD BLVD., SUITE 400  
FORT LAUDERDALE FL 33301

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

3. Date Organized or Qualified

3a. State of Formation

11/19/1997

FL

4. FEI Number

☒ Applied For

☐ Not Applicable

5. Date of Last Report

6. Certificate of Status Desired

\$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent/Office

MURDOCH, ROBERT E  
JOHNSON, ANSELMO, MURDOCH BURKE & GE  
790 EAST BROWARD BLVD., SUITE 400  
FORT LAUDERDALE FL 33301

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

DATE

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

MGRM BECK, ANDREW J

613 PITT STREET

MT. PLEASANT SC

MGRM JONES, JAMES KEITH

131 CHICO LANE

MT. PLEASANT SC

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\*\*\*188.75 \*\*\*188.75

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

ANDREW J. BECK 21 AUG 1998 (343)- 849-8977

*KA Aventura LC*

613 Pitt Street  
Mt. Pleasant, South Carolina  
29464-4738  
voice/fax 803-849-8799

21 August 1998


Division of Corporations  
Registration Section  
Post Office Box 6327  
Tallahassee, Florida  
32314

Re: Filing Fee KA Aventura LC

Ladies and Gentlemen:

Enclosed please find the duly executed Annual Report for K.A. Aventura, L.C. for 1998, along with a check in the amount of \$188.75. I am writing to you today to request that you waive the \$400.00 late fee. I became gravely ill in February of 1998, and did not receive this annual report for filing from my registered agent until March of 1998, at which time I was not able to function. I had brain surgery on 22 May of this year, and am only now getting back on my feet and uncovering this and other paperwork that is woefully late. Many thanks for your consideration. I will understand if you cannot waive the penalty.

Sincerely,



Andrew J. Beck  
AJB/itm  
Enclosure