

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # M03000003385

1. Entity Name  
AVNM GENERAL, LLC



Principal Place of Business  
255 ALHAMBRA CIRCLE, SUITE 1100  
CORAL GABLES, FL 33134-7400

Mailing Address  
255 ALHAMBRA CIRCLE, SUITE 1100  
CORAL GABLES, FL 33134-7400



04202005No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
NOT APPLICABLE

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

BLUMBERG, PHILIP  
255 ALHAMBRA CIRCLE, SUITE 1100  
CORAL GABLES, FL 33134-7400

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2005**

1100000346803

04/30/05-80080-021 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	BLUMBERG, PHILIP F
STREET ADDRESS	255 ALHAMBRA CIRCLE, SUITE 1100
CITY-ST-ZIP	CORAL GABLES, FL 331347400
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this 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 60B, Florida Statutes.

Philip F. Blumberg, Sole Member

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

April 25, 2005

Date

305.569.9500

Daytime Phone #