

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 20, 2005 8:00 am
Secretary of State

05-02-2005 90093 032 ****50.00

DOCUMENT # M04000001641					
1. Entity Name AVSF 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		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 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			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 reappointing)					
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BLUMBERG, PHILIP F 255 ALHAMBRA CIRCLE, SUITE 1100 CORAL GABLES, FL 331347400	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
11. I 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 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 person or trustee empowered to execute this report as required by Chapter 60B, Florida Statutes.					
Philip F. Blumberg, Sole Member					
SIGNATURE: _____		April 25, 2005		305.569.9500	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					

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