

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Aug 13, 2009
Secretary of State**

DOCUMENT# P00000017496

Entity Name: AVENTURA INSURANCE AGENCY, INC.

Current Principal Place of Business:

3909 NE 163RD STREET
NORTH MIAMI BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

3909 NE 163RD STREET
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

FEI Number: 52-2219687 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUBBISON, AARON L JD
3909 NE 163RD STREET
SUITE 304
NORTH MIAMI BEACH, FL 33160 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

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: GRIMSLEY, CHARLES J
Address: 3909 N.E. 163RD ST.
City-St-Zip: N. MIAMI, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: PARRILLO, RICHARD P JR.
Address: 3909 N.E. 163RD ST.
City-St-Zip: N. MIAMI, FL 33160

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AARON CUBBISON

RA

08/13/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date