

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000103462

Entity Name: AVENTURAINVEST, INC.

FILED
Mar 18, 2004
Secretary of State

Current Principal Place of Business:

PEDRO OJANGUREN CCS 432
20822 NE 32 AVE
MIAMI, FL 33180 US

New Principal Place of Business:

Current Mailing Address:

PEDRO OJANGUREN CCS 432
20822 NE 32 AVE
MIAMI, FL 33180 US

New Mailing Address:

FEI Number: 51-0433639 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERRELL GROUP CORPORATE SERVICES, L.L.C.
201 S. BISCAYNE BLVD.
34TH FLOOR
MIAMI, FL 33131 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OTANGUREN, PEDRO
Address: AV LAS LO MAS, E 01 SANDY PAR
City-St-Zip: LOMAS LAGUNITA, CARACAS, VEN,

Title: VP () Delete
Name: LIBE LESZADLA, MIREN
Address: AV LAS LO MAS, E 01 SANDY PAR
City-St-Zip: LOMAS LAGUNITA, CARACAS, VEN,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change () Addition
Name: OJANGUREN, PEDRO P
Address: AV LAS LOMAS, E 01 SANDY PAR
City-St-Zip: LOMAS LAGUNITA, CARACAS, VEN, MI VENEZUELA VE

Title: MISS (X) Change () Addition
Name: LIBE LESZAOLA, MIREN VP
Address: AV LAS LOMAS, E 01 SANDY PAR
City-St-Zip: LOMAS LAGUNITA, CARACAS, VEN, MI VENEZUELA VE

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 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: PEDRO PABLO OJANGUREN

PRE

03/18/2004

Electronic Signature of Signing Officer or Director

_____ Date