

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000129165

Entity Name: AVENTURA ASSOCIATES LIMITED., INC

FILED
May 10, 2006
Secretary of State

Current Principal Place of Business:

3100 N 29 COURT
SUITE 200
HOLLYWOOD, FL 33020

New Principal Place of Business:

18240 COLLINS AVE
SUNNY ISLES, FL 33160 US

Current Mailing Address:

3100 N 29 COURT
SUITE 200
HOLLYWOOD, FL 33020

New Mailing Address:

18240 COLLINS AVE
SUNNY ISLES, FL 33160

FEI Number: 20-3507599

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHNITZER, GERALD S
3100 N 29 COURT
SUITE 200
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

THE ACCOUNTING DEPT OF THE SOUTHEAST INC
1440 CORAL RIDGE DR
211
CORAL SPRINGS, FL 33071 US

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: WM PAUL BUNNELL

05/10/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Change (X) Addition
Name: UMANSKI, JAKOB
Address: 18240 COLLINS AVE
City-St-Zip: SUNNY ISLES, FL 33160 US

Title: VP () Change (X) Addition
Name: SALIBA, J DUANE
Address: 18240 COLLINS AVE
City-St-Zip: SUNNY ISLES, FL 33160 US

I hereby certify that the information supplied with this filing does not qualify for the 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: J DUANE SALIBA

VP

05/10/2006

Electronic Signature of Signing Officer or Director

Date