

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000027261

Entity Name: EWC AVENTURA, INC.

**FILED**  
**Jan 27, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

3023 AVENTURA BLVD  
AVENTURA, FL 33180 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 802208  
AVENTURA, FL 33280 US

**New Mailing Address:**

FEI Number: 26-2187057

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CMS INTERNATIONAL ENTERPRISES, INC.  
550 BILTMORE WAY  
200  
CORAL GABLES, FL 33134 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: PT  
Name: COBA, DAVID  
Address: P.O. BOX 802208  
City-St-Zip: AVENTURA, FL 33280 US

Title: VP  
Name: COBA, JOSHUA  
Address: P.O. BOX 802208  
City-St-Zip: AVENTURA, FL 33280 US

Title: S  
Name: STREINER, JESSICA  
Address: P.O. BOX 802208  
City-St-Zip: AVENTURA, FL 33280 US

I hereby 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 all other like empowered.

SIGNATURE: DAVID COBA

P/T

01/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date