## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000052905

Entity Name: AURORA VENTURES, INC.

**FILED** Mar 19, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

13930 MONTICELLO ST 13762 STATE ROAD 84 DAVIE, FL 33325

SUITE 262

DAVIE, FL 33325

**Current Mailing Address: New Mailing Address:** 

13762 STATE ROAD 84 13930 MONTICELLO ST SUITE 262 DAVIE, FL 33325

DAVIE, FL 33325 US

FEI Number: 65-0674742 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LOBIONDO, MICHAEL R LOBIONDO, MICHAEL R 13930 MONTICELLO ST 13762 STATE ROAD 84 DAVIE, FL 33325 SUITE 262 DAVIE, FL 33325 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: 03/19/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition LOBIONDO, MICHAEL R LOBIONDO, MICHAEL R

Name: Name: 13930 MONTICELLO ST Address: 13762 STATE ROAD 84, SUITE 262 Address:

City-St-Zip: **DAVIE, FL 33325** City-St-Zip: DAVIE, FL 33325 US

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: MICHAEL ROSS LOBIONDO 03/19/2009 D