

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000063667

**Entity Name:** AVENTURA MARINA 1918 LLC

**Current Principal Place of Business:**

3330 NE 190TH ST  
1918  
AVENTURA, FL 33180

**Current Mailing Address:**

20000 E COUNTRY CLUB DR  
APT 1509  
AVENTURA, FL 33180 US

**FEI Number:** 90-0856464

**Certificate of Status Desired:** No

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

MELUL, ESSER D  
20000 E COUNTRY CLUB DR  
APT 1509  
AVENTURA, FL 33180 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name KABABIE, HEMDA  
Address 20000 E COUNTRY CLUB DR  
APT 1509  
City-State-Zip: AVENTURA FL 33180

Title MGRM  
Name TZABAN-COHEN, ROTEM M  
Address 20000 E COUNTRY CLUB DR  
APT 1509  
City-State-Zip: AVENTURA FL 33180

Title MGRM  
Name TZABAN-COHEN, YOSEF  
Address 20000 E COUNTRY CLUB DR  
APT 1509  
City-State-Zip: AVENTURA FL 33180

Title MGRM  
Name AMKIE, LINDA  
Address 20000 E COUNTRY CLUB DR  
APT 1509  
City-State-Zip: AVENTURA FL 33180

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** HEMDA KABABIE

**MANAGER**

**02/23/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date