

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000099464

Entity Name: AVENTURAPLACE 110, LLC

Current Principal Place of Business:

819 NE 193 TERRACE
MIAMI, FL 33179

Current Mailing Address:

819 NE 193 TERRACE
MIAMI, FL 33179

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KANAREK, ENRIQUE
819 NE 193 TERRACE
MIAMI, FL 33179 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 AMBR
Name KANAREK, LAZARO 99%
Address 819 NE 193 TERRACE
City-State-Zip: MIAMI FL 33179

Title AMBR
Name KANAREK, JONATHAN J 1%
Address 819 NE 193 TERRACE
City-State-Zip: MIAMI FL 33179

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: KANAREK, LAZARO 99%

MEMBER

03/24/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date