2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 26, 2005 8:00 am Secretary of State **DOCUMENT # L03000028609** 04-26-2005 90023 002 ****50.00 COMMERCIAL PROPERTIES, LLC Principal Place of Business Mailing Address 20047924 6555 SOMERSET CIRCLE 6555 SOMERSET CIRCLE BOCA RATON, FL 33496 BOCA RATON, FL 33496 US 01242005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 02-0709500 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GIORGI, JOHN L DO NOT WRITE 6555 SOMERSET CIRCLE BOCA RATON, FL 33496 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME GIORGI, JOHN L 6555 SOMERSET CIRCLE STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33496 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 regarder or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. limited liability company or the re-

SIGNATURE: PRESENTATIVE SIGNATURE AND EMPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED