## 2007 LIMITED LIABILITY COMPANY

## FILED Apr 23, 2007 8:00 am Secretary of State

ANNUAL REPORT	•
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DOCUMENT #L05000018047						04-23-2007 903	374 041 **	***50.00	
1. Entity Nam PORTEN	CW COMMERCIAL, LC								
666 SOUTH	H MILITARY TRAIL  BEACH, FL 33442 US  Marting Address  666 SOUTH MILITARY TRAIL  DEERFIELD BEACH, FL 33442 US					60038360			
2. Principal Place of Business - No P.O. Box # 3. Malling Address 333 /VE 2 4 5+ 333 /VE			ړ ړ	<u>'''</u> 'S'	<u> </u>				
Suite, Apt.		Suite, Apt. #, etc.					R2E083 (12/	(06)	
Pe / a	y Beach Fl	Schay Be	46	4. /	FI	4. FEI Number 75-3184476	-	Applied For Not Applicable	
333 ·	483 Country USA	Zip 33483	Count			5. Certificate of Status Desired	\$5.00 Fee Re	Additional quired	
	6. Name and Address of Current R	egistered Agent		Name /		7. Name and Address of New Regist	tered Agent		
COREN, C					George Coren				
	.ITARY TRAIL .D BEACH, FL 33442			Street Ad	dress (F	P.O. Box Number is Not Acceptable)	<u>~</u>		
				City	10	ray Beach	FL Z	3493	
8. The above the obligat	named entity submits this statement for ions of registered agent.	the purpose of changing its .	registere	d office or r	registere	ed agent, or both, in the State of Florida.	I am familiar	with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent ar	600	ر	5.0	<u> </u>	4/19	109		
		id title if applicable. (NOTE	:" Registered	Agent signature	e required i	when reinstating)	DATE	1.5 ****	
D	ling Fee is \$50:00 ue by May 1, 2007		•			Florida Dep	eck payable partment of		
9. TITLE	MANAGING MEMBER	S/MANAGEHS Delete	10.	· · · · · · · · · · · · · · · · · · ·		ADDITIONS/CHAI		ange Addition	
NAME STREET ADDRESS	PORTEN, SCOTT B 666 SOUTH MILITARY TRAIL		NAME		33	13 INE 2 MILLS	<i>†</i>		
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442		•	T ADORESS ST-ZIP	De	Iray Beach	F13.	348-3	
TITLE .	TVP COREN, GEORGE	☐ Delete	TITLE			3 NE 2 Nd St	€ Cha	ange	
STREET ADDRESS	666 S. MILITARY TRAIL		NAME STREE	TADORESS	33.	3 N = 7 = 3 +			
CITY-ST-ZiP	DEERFIELD BEACH, FL 33442 SVP	☐ Delete	<del></del> -	ST-ZIP	De	Iray Beach	FL	35485	
NAME	SMITH, LENNIE F	C Delete	TITLE NAME		3.3.	3 NE 2 NI ST	Cha C.	inge 🔲 Addition	
STREET ADDRESS CITY+ST-ZIP	666 S. MILITARY TRAIL DEERFIELD BEACH, FL 33442			T ADORESS				~ / / <b>/ ?</b> >	
TITLE	····	☐ Delete	TITLE	1		Iray Beach,	<u>/ / \S\</u>	13 70 → Addition	
name Street address			NAME STREE	T ADDRESS	33:	3 NE S T ST			
CITY-ST-ZIP					De	lay Beach 1	9 33	48-3	
TITLE NAME		☐ Delete	TITLE NAME		בכל	NE 2 NA ST	☐ Cha	nge [] Addition	
STREET ADORESS CITY-ST-ZIP			STREE	TADORESS I					
TITLE	1	☐ Delete	CITY-S	ST-ZIP	Pel	lay Beach +	<u>/ ડડ</u>	993 noe □ Addition	
NAME STREET ADDRESS			NAME						
CITY-ST-ZIP			CITY-S	T ADORESS ST-ZIP					
11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.									
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 4/19/07 56/18/19/1/09									