


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**1/ Feb 16, 2006 8:00 am**  
**Secretary of State**

01-20-2006 90050 001 \*\*\*\*50.00

**DOCUMENT # L05000057592**

1. Entity Name  
**COMMERCIAL MANAGEMENT GROUP, LLC**



Principal Place of Business  
**7901 W 25TH AVE BAY 3&4  
 HIALEAH, FL 33016**

Mailing Address  
**7901 W 25TH AVE BAY 3&4  
 HIALEAH, FL 33016**

**30000619**

REC 4 2006

BY: \_\_\_\_\_



2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State

Zip Country

01062006 Chg-LLC CR2E0B3 (11/05)

4. FEI Number  
**20-3009896**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**RAFULS, RICHARD  
 7901 W 25TH AVE BAY 3&4  
 HIALEAH, FL 33016**

7. Name and Address of New Registered Agent

Name \_\_\_\_\_

Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_

City **FL** Zip Code \_\_\_\_\_

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-issuing) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
 Due by May 1, 2006**

**Make check payable to  
 Florida Department of State**

**9. MANAGING MEMBERS/MANAGERS**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
MGRM	RAFULS, RICHARD	7901 W 25TH AVE BAY 3&4	HIALEAH, FL 33016	<input type="checkbox"/>
MGRM	MARRERO, HECTOR A	7901 W 25TH AVE BAY 3&4	HIALEAH, FL 33016	<input type="checkbox"/>
MGRM	RINEHARA, WAYNE	7901 W 25TH AVE BAY 3&4	HIALEAH, FL 33016	<input type="checkbox"/>
MGRM	RINEHARA, ODALYS B	7901 W 25TH AVE BAY 3&4	HIALEAH, FL 33016	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

**10. ADDITIONS/CHANGES**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
MGRM	RINEHART, WAYNE	7901 W. 25 AVE, BAY 3+4	HIALEAH, FL 33016	<input checked="" type="checkbox"/>	<input type="checkbox"/>
MGRM	RINEHART, ODALYS B	7901 W. 25 AVE, BAY 3+4	HIALEAH, FL 33016	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 receiver or trustee empowered to execute this report, as required by Chapter 608, Florida Statutes.

**SIGNATURE:** \_\_\_\_\_ *(Signature)* **1/11/06 (305) 883-8881**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

ATTACHMENT

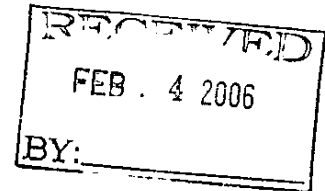


ATTACHMENT

30000619

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 27, 2006



COMMERCIAL MANAGEMENT GROUP, LLC  
7901 W 25TH AVE BAY 3&4  
HIALEAH, FL 33016

Subject: **COMMERCIAL MANAGEMENT GROUP, LLC**

Reference Number:

**L05000057592**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you **MUST** now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

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ANNUAL REPORTS SECTION