2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 08, 2008 08:00 Al Secretary of State

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DOCUMENT # 1. Entity Name COMMERCIAL REA				
Principal Place of Business 5300 ADAMS STREET HOLLYWOOD, FL 33021	US	Mailing Address 5300 ADAMS STREET HOLLYWOOD, FL 33021	US	

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Principal Place 5300 ADAMS HOLLYWOOD	STREET	Aailing Address 5300 ADAMS STREET HOLLYWOOD, FL 33021 US	3		10/16 1 0/14 10/14 10/14 10/14	BBIN IBBN BNII BBNI BIBBL BIIIBBL II IBBN	
DO NOT WRITE IN THIS SPAC			CE	02052008 4. FEI Numbe 22-3934	No Chg-P	CR2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LAW OFFICES OF BRIAN T. MOCK, P.A. ONE EAST BROWARD BOULEVARD SUITE 604 FORT LAUDERDALE, FL 33301			DO NOT WRITE 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 purited name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
FILI After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Finan Trust Fund Contribution.		5.00 May Be ded to Fees	 U0000 n2/19/ng	-80001-023 150 00 0820396	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE P LEPPANEN, DIANNE 5300 ADAMS STREET HOLLYWOOD, FL 33021	CTORS		·			
TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDRESS			DO NOT WRITE IN THIS SPACE			
NAME STREET ADDRESS CHY-S1-ZIP TITLE NAME							
CITY-ST-ZIP							

12. 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 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:

LA CHARLES AND TYPED OR SKINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/2008

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