


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90049 003 ***158.75

DOCUMENT # 605236	
1. Entity Name COMMERCIAL BANK OF FLORIDA	

Principal Place of Business 1550 S.W. 57TH AVENUE MIAMI, FL 33144	Mailing Address 1550 S.W. 57TH AVENUE MIAMI, FL 33144
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



01262007 Chg-P CR2E034 (12/06)

4. FEI Number 59-1872834	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
PARTAGAS, JACK J % COMMERCIAL BANK OF FLORIDA 1550 S.W. 57TH AVENUE MIAMI, FL 33144

7. Name and Address of New Registered Agent
Name Bruce P. Steinberger
Street Address (P.O. Box Number is Not Acceptable) 1550 SW 57th Avenue
City Miami
State FL
Zip Code 33144

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 Bruce P. Steinberger <i>Bruce P. Steinberger</i>	DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PARTAGAS, JACK J 7540 SW 158TH TERRACE MIAMI, FL 33157 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NAMOFF, ROBERT 9440 SW 140 STREET MIAMI, FL 33176 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIMON, SHERMAN 9999 COLLINS AVE. 20K BAL HARBOUR, FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD ARMALY, JOSEPH 1550 S.W. 57TH AVENUE MIAMI, FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YELEN, MARTIN 1925 BRICKELL AVENUE, #1001 MIAMI, FL 33129 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SONTAG, MICHAEL W 14535 SW 63 COURT MIAMI, FL 33158 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS Steinberger, Bruce P. 1550 SW 57th Ave Miami, FL 33144 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Anderson, Cromwell A. 1029 Hardee Road Miami, FL 33146 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT Reed, Barbara E. 1550 SW 57th Avenue Miami, FL 33144 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 officers empowered.	
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SIGNATURE: <i>Bruce P. Steinberger</i>	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #
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ATTACHMENT

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Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		01262007 Chg-P CR2E034 (12/06)	
Zip		Country		4. FEI Number 59-1872834	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
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PARTAGAS, JACK J % COMMERCIAL BANK OF FLORIDA 1550 S.W. 57TH AVENUE MIAMI, FL 33144				Name Bruce P. Steinberger	
				Street Address (P.O. Box Number is Not Acceptable) 1550 SW 57th Avenue	
				City Miami	
				FL Zip Code 33144	
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 Bruce P. Steinberger <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 (A) After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees		2(A)+(A) = \$158.75	
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SIGNATURE:					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date Daytime Phone #</small>					