## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Jan 20, 2006 8:00 am Secretary of State

ANNUAL REPORT				Se	Secretary of State			
DOCUMENT # L01000009033				2.91%	01-20-2006 90052 003 ****50.00			
1. Entity Name TDW MANAGEMENT, L.L.C.				01	01-20-2000 90032 003 30.00			
I DVV WA	NAGEWIENT, L.L.C.							
			1					
Principal Place	e of Business	Mailing Address						
10092 NW 5		10092 NW 53RD STREE						
SUNKISE, FL	33351-8075	SUNRISE, FL 33351-80	1/5					
		T = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 =						
2. Principal P	Job H.L. ROAD	3. Mailing Address H	In Ro	FD				
Suite, Apt.		Suite, Apt. #, etc.	<u></u>	01112006	Chg-LLC C	R2E083 (11/05)		
- 0 Char					Olig-EEO Ol	· · · · · · · · · · · · · · · · · · ·	- U - of E	
چائرناک اگرناک	Rise . FL	SVNR15c.	FL.	4. FEI Number 59-37345	42		plied For Applicable	
333	<del></del>	7225	Country	5. Certificate of	Status Desired	\$5.00 Addi		
, ,	6. Name and Address of Current	Registered Agent		7. Name and Ac	Idress of New Regist		<u> </u>	
			Name					
SHABTAI, RAPHAEL 10092 NW 53RD STREET			Stroet	Street Address (P.O. Bly: Number is Net Acceptable)				
SUNRISE, FL 33351-8075			22	OI NOT	INITE KE	3,744		
	•		000	A		7.0.1		
				u Rise		FL 33	351	
	named entity submits this statement to ions of registered agent	r the purpose of changing its r	registered office or	registered agent, or both,	in the State of Florida.	I am familiar with, a	and accept	
SIGNATURE 2		•			. /11/	96		
SIGNATURE A	Signature, typico or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signati	re required when reinstating)	1/1/	DATE		
<b>e</b> :	ling Fee is \$50.00				Make ch	eck payable to		
D:	ue by May 1, 2006					partment of State	)	
9.	MANAGING MEMBE	PS / MANAGERS	10.		ADDITIONS/CHA	NGES	<u>.</u>	
TITLE	MGRM	Delete	TITLE		ADDITIONS) CHA	Change		
NAME	SHABTAI, DALIA		NAME		bern Re		Addition	
STREET ADDRESS	10092 N.W. 53RD ST			CCAL ANG		<b>*</b> A⇒	☐ Addition	
CITY-ST-ZIP	CODE LAUDEDDALE EL 22264		STREET ADDRESS	SSOI NO			☐ Addition	
	FORT LAUDERDALE, FL 33351		CITY-ST-ZIP	SUNKISE,		751		
TITLE NAME	FORT LAUDERDALE, FL 33351 MGRM SHABTAI, RAPHAEL	☐ Delete	1	SUNKISE,	FL 333	Change	Addition Addition	
TITLE NAME STREET ADDRESS	MGRM SHABTAI, RAPHAEL 10092 N.W. 53RD ST	☐ De lete	CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	SUNKISE, SS=1 No	<i>FL</i> 333 6 HILL A	A Change		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SHABTAI, RAPHAEL	□ Delete	CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	SUNKISE,	<i>FL</i> 333 6 HILL A	AChange LOAD	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MGRM SHABTAI, RAPHAEL 10092 N.W. 53RD ST	☐ De lete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	SUNKISE, SS=1 No	<i>FL</i> 333 6 HILL A	A Change		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MGRM SHABTAI, RAPHAEL 10092 N.W. 53RD ST	□ Delete	CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	SUNKISE, SS=1 No	<i>FL</i> 333 6 HILL A	AChange LOAD	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MGRM SHABTAI, RAPHAEL 10092 N.W. 53RD ST	□ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	SUNKISE, SS=1 No	<i>FL</i> 333 6 HILL A	AChange LOAD	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MGRM SHABTAI, RAPHAEL 10092 N.W. 53RD ST	□ Delete	CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE TITLE TITLE TITLE TITLE TITLE	SUNKISE, SS=1 No	<i>FL</i> 333 6 HILL A	AChange LOAD	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MGRM SHABTAI, RAPHAEL 10092 N.W. 53RD ST	□ Delete □ Delete	CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME	SUNKISE, SS=1 No	<i>FL</i> 333 6 HILL A	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MGRM SHABTAI, RAPHAEL 10092 N.W. 53RD ST	□ Delete □ Delete	CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE TITLE TITLE TITLE TITLE TITLE	SUNKISE, SS=1 No	<i>FL</i> 333 6 HILL A	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MGRM SHABTAI, RAPHAEL 10092 N.W. 53RD ST	□ Delete □ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	SUNKISE, SS=1 No	<i>FL</i> 333 6 HILL A	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MGRM SHABTAI, RAPHAEL 10092 N.W. 53RD ST	☐ Delete ☐ Delete ☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	SUNKISE, SS=1 No	<i>FL</i> 333 6 HILL A	Change  Change	Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MGRM SHABTAI, RAPHAEL 10092 N.W. 53RD ST FORT LAUDERDALE, FL 33351	☐ Delete ☐ Delete ☐ Delete ☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	SUNKISE, SS=1 No	<i>FL</i> 333 6 HILL A	Change  Change	Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP CITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SHABTAI, RAPHAEL 10092 N.W. 53RD ST FORT LAUDERDALE, FL 33351	☐ Delete ☐ Delete ☐ Delete ☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	SUNKISE, SS=1 No	<i>FL</i> 333 6 HILL A	Change  Change	Addition Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MGRM SHABTAI, RAPHAEL 10092 N.W. 53RD ST FORT LAUDERDALE, FL 33351	☐ Delete ☐ Delete ☐ Delete ☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	SUNKISE, SS=1 No	<i>FL</i> 333 6 HILL A	Change  Change  Change	Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE	MGRM SHABTAI, RAPHAEL 10092 N.W. 53RD ST FORT LAUDERDALE, FL 33351	☐ Delete ☐ Delete ☐ Delete ☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	SUNKISE, SS=1 No	<i>FL</i> 333 6 HILL A	Change  Change	Addition Addition Addition	

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 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: X HALL SHASTAI //11/06 (SS4)746-800