

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED

2005 APR -6 PM 2: 15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L03000007770

1. Entity Name

SMW PROPERTIES, L.L.C.



Principal Place of Business

1540 NW 113TH WAY
PEMBROKE PINES FL 33026

Mailing Address

1540 NW 113TH WAY
PEMBROKE PINES FL 33026

2. Principal Place of Business

2025 S. Miami Road

3. Mailing Address

P.O. Box 246251

Suite, Apt. #, etc.

Suite, Apt. #, etc.



MOORE

CR2E083 (4/04)

City & State

Ft. Lauderdale Florida

City & State

Pembroke Pines Florida

4. FEI Number

35-2198151

Applied For

Not Applicable

Zip

33316

Country

Broward

Zip

33024

Country

Broward

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

WENGROW, SCOTT
1540 NW 113TH WAY
PEMBROKE PINES FL 33026

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By September 8, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☐ Delete
NAME WENGROW, SCOTT
STREET ADDRESS 1540 NW 113TH WAY
CITY-ST-ZIP PEMBROKE PINES FL 33026

TITLE MGRM ☐ Delete
NAME WENGROW, SHERRI
STREET ADDRESS 1540 NW 113TH WAY
CITY-ST-ZIP PEMBROKE PINES FL 33026

TITLE MGRM ☐ Delete
NAME WEINTRAUB, LEONARD
STREET ADDRESS 1540 NW 113TH WAY
CITY-ST-ZIP PEMBROKE PINES FL 33026

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGRM ☒ Change ☐ Addition
NAME Wengrow, Scott
STREET ADDRESS P.O. Box 246251
CITY-ST-ZIP Pembroke Pines FL 33024

TITLE MGRM ☒ Change ☐ Addition
NAME Wengrow, Sherry
STREET ADDRESS P.O. Box 246251
CITY-ST-ZIP Pembroke Pines FL 33024

TITLE MGRM ☒ Change ☐ Addition
NAME Weintraub, Leonard
STREET ADDRESS P.O. Box 246251
CITY-ST-ZIP Pembroke Pines FL 33024

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

9/8/04