

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056606

Entity Name: COMMERCIAL VENTURES, LLC

FILED
Aug 22, 2006
Secretary of State

Current Principal Place of Business:

3201 NORTHEAST 183RD STREET
#1204
AVENTURA, FL 33160

Current Mailing Address:

3201 NORTHEAST 183RD STREET
#1204
AVENTURA, FL 33160

New Principal Place of Business:

2500 E. HALLANDALE BEACH BLVD.
STE. 606
HALLANDALE BEACH, FL 33009

New Mailing Address:

2500 E. HALLANDALE BEACH BLVD.
STE. 606
HALLANDALE BEACH, FL 33009

FEI Number: 20-1428421 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MICHAEL, GLUZMAN
3201 NORTHEAST 183RD STREET
#1204
AVENTURA, FL 33160 US

Name and Address of New Registered Agent:

MICHAEL, GLUZMAN
3201 NE183RD STREET
#1204
AVENTURA, FL 33160 US

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.

SIGNATURE:

08/22/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MICHAEL, GLUZMAN
Address: 3201 NORTHEAST 183RD STREET #1204
City-St-Zip: AVENTURA, FL 33160

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MICHAEL, GLUZMAN
Address: 3201 NE 183RD STREET #1204
City-St-Zip: AVENTURA, FL 33160

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: MICHAEL GLUZMAN

MGRM

08/22/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date