

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000061321

Entity Name: C&W, LLC

FILED  
Apr 28, 2005  
Secretary of State

**Current Principal Place of Business:**

4695 NW 199 ST.  
CAROL CITY, FL 33035 US

**New Principal Place of Business:**

**Current Mailing Address:**

540 SW 178 WAY  
PEMBROKE PINES, FL 33029 US

**New Mailing Address:**

FEI Number: 20-1537960

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LEVINE SEGAUL & BARRIOS, P.A.  
4300 N. UNIVERSITY DR.  
SUITE A-106  
FORT LAUDERDALE, FL 33351 US

**Name and Address of New Registered Agent:**

LEVINE SEGAUL & BARRIOS, P.A.  
790 EAST BROWARD BOULEVARD  
SUITE 302  
FORT LAUDERDALE, FL 33301 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:

04/28/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: WEINTRAUB, LISA M  
Address: 540 SW 178 WAY  
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: MGRM ( ) Delete  
Name: WEINTRAUB, STUART R  
Address: 540 SW 178 WAY  
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: MGRM ( ) Delete  
Name: CHRISTIANO, DONALD L  
Address: 921 SW 109 AVE.  
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: MGRM ( ) Delete  
Name: CHRISTIANO, ROSE M  
Address: 921 SW 109 AVE  
City-St-Zip: PEMBROKE PINES, FL 33029 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: CHRISTIANO, DONALD L  
Address: 921 SW 109 AVE.  
City-St-Zip: PEMBROKE PINES, FL 33025 US

Title: MGRM (X) Change ( ) Addition  
Name: CHRISTIANO, ROSE M  
Address: 921 SW 109 AVE  
City-St-Zip: PEMBROKE PINES, FL 33025 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LISA WEINTRAUB

MGRM

04/28/2005

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