2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2005
Secretary of State

DOCUMENT# L04000065095

Entity Name: CWD, LLC

Current Principal Place of Business:

901 PONCE DE LEON BLVD STE. 603
CORAL GABLES, FL 33134

New Principal Place of Business:

6035 SW 120 ST
MIAMI, FL 33156

Current Mailing Address:

901 PONCE DE LEON BLVD STE. 603
CORAL GABLES, FL 33134

New Mailing Address:

6035 SW 120 ST
MIAMI, FL 33156

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALBORNOZ, WILLIAM H
901 PONCE DE LEON BLVD STE. 603
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

OSORNO, JUAN M
6035 SW 120 ST
MIAMI, FL 33156 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: JUAN M OSORNO 04/27/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: OSORNO, JUAN
Address: 901 PONCE DE LEON BLVD STE. 603
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: OSORNO, JUAN
Address: 6035 SW 120 ST
City-St-Zip: MIAMI, FL 33156

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: JUAN M OSORNO MGR 04/27/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date