

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

**FILED**  
**May 04, 2006 8:00 am**  
**Secretary of State**

05-04-2006 90022 010 \*\*\*\*50.00

**DOCUMENT # L04000073001**

1. Entity Name

**M. & W. REAL ESTATE, LLC**



Principal Place of Business

**3165 HOLIDAY SPRINGS BLVD  
# 22  
MARGATE FL 33063**

Mailing Address

**3165 HOLIDAY SPRINGS BLVD  
# 22  
MARGATE FL 33063**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E083 (10/05)

4. FEI Number

**20-1724927**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MARTIN, KAREN E.  
3165 HOLIDAY SPRINGS BLVD #22  
MARGATE FL 33063**

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

*KAREN E. MARTIN, Mgr.*

*Karen E. Martin*

*4/28/2006*

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 May 1, 2006**

9. MANAGING MEMBERS / MANAGERS

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGR  
VUOLO, ROBERT  
433 ROEDEL PLACE  
PARAMUS NJ 07652**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGRM  
DESSINGUE, DIANE  
6500 NW 41ST TERRACE  
COCONUT CREEK FL 33073**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGRM  
FINIZIO, STEPHEN  
701 NW 13 STREET, D-8  
BOCA RATON FL 33486**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGRM  
MARTIN, KAREN E  
3165 HOLIDAY SPRINGS BLVD #22  
MARGATE FL 33063**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGRM  
KAVANAGH, JOSEPH  
5424 NW 50TH CT  
COCONUT CREEK FL 33073**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGRM  
WILLIAMS, JEAN  
6500 NW 41ST TERRACE  
COCONUT CREEK FL 33073**

10. ADDITIONS / CHANGES

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  
**1863 DISCOVERY DRIVE  
DEERFIELD BEACH FL. 33442**

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 exemptions contained in Section 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:

*Karen E. Martin*

*Karen E. Martin*

*4/28/2006*

*(954) 346-2518*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #