. \$2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000078740

1. Entity Name
CM SALES, LLC



FILED Jan 11, 2008 08:00 A Secretary of State

Principal Place of Business

Mailing Address

4940 NW 104TH AVENUE CORAL SPRINGS, FL 33076

4940 NW 104TH AVENUE CORAL SPRINGS, FL 33076

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01052008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-1840630

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

MEYER, PHYLLIS 4940 N.W. 104TH AVE. CORAL SPRINGS, FL 33076

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of changing its registere tions of registered agent.	d office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE		
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MEYER, CHARLES 4940 NW 104TH AVENUE CORAL SPRINGS, FL 33076	, U00000779779 01/11/08-80051-013 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE IN THIS SPACE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ____

STREET ADDRESS
CITY-ST-ZIP · · ·

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

8/08

954-346-5703

Daytme Phone #