

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Jan 12, 2006 08:00 AM  
Secretary of State**

**DOCUMENT # L04000086574**

1. Entity Name  
**BEWAM, LLC**



Principal Place of Business  
**14206 CARLSON CIRCLE  
TAMPA, FL 33626**

Mailing Address  
**14206 CARLSON CIRCLE  
TAMPA, FL 33626**



01092006No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**20-1990289**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**BERGMAN, ALAN L  
14206 CARLSON CIRCLE  
TAMPA, FL 33626**

**DO NOT WRITE  
IN THIS SPACE**

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

*Alan L. Bergman*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

*1/10/06*

**Filing Fee is \$50.00  
Due by May 1, 2006**

**000000384914  
01/17/06-80034-019 50.00**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**MGRM  
BERGMAN, ALAN L  
14206 CARLSON CIRCLE  
TAMPA, FL 33626**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**MGR  
WEISS, MAURICE  
14206 CARLSON CIRCLE  
TAMPA, FL 33626**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

**DO NOT WRITE  
IN THIS SPACE**

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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

*Alan L. Bergman*

Signature and typed or printed name of signing managing member or authorized representative

*1/10/06*

Date

Designation