

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000009095

Entity Name: PWMF LLC

FILED  
Apr 28, 2006  
Secretary of State

## Current Principal Place of Business:

6971 N. FEDERAL HIGHWAY  
BOCA RATON, FL 33487

## New Principal Place of Business:

500 N FEDERAL HWY  
POMPANO BEACH, FL 33062

## Current Mailing Address:

6971 N. FEDERAL HIGHWAY  
BOCA RATON, FL 33487

## New Mailing Address:

PO BOX 810488  
BOCA RATON, FL 33481

FEI Number: 20-2357366

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ADLER, SIDNEY  
6971 N. FEDERAL HIGHWAY  
BOCA RATON, FL 33487 US

## Name and Address of New Registered Agent:

WOLOFSKY, PETER  
500 N FEDERAL HWY  
POMPANO BEACH, FL 33062 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: PETER WOLOFSKY

04/28/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition  
Name: WOLOFSKY, PETER  
Address: 500 N FEDERAL HWY  
City-St-Zip: POMPANO BEACH, FL 33062

Title: MGR ( ) Change (X) Addition  
Name: MARITAL TRUST U/W OF, KENNETH WOLOF S KY  
Address: 150 CANTERBURY LANE  
City-St-Zip: PALM BEACH, FL 33480

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: PETER WOLOFSKY

MGRM

04/28/2006

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