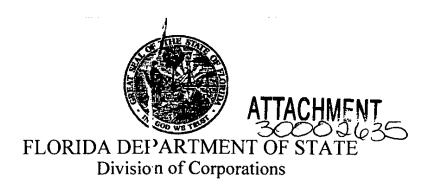
## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Mar 16, 2006 8:00 am Secretary of State

VILLANT INT. AILI							Secrei	tary of a	State
DOCUMENT # L05000016860  1. Entity Name COPENHAGEN W.H. LLC						<u> </u>		06 90426 029 **	
COPENIA	AGEN W		·	\ 					
Principal Place of Business			Mailing Address				3.11.11	11.75.75	
29 S.E. 5TH STREET			29 S.E. 5TH STREET BOCA RATON, FL 3343				000	U2635	
BOCA RATON, FL 33432							mmman		, Heren
2. Principal Place of Business			3. Mailing Address  Suite, Apt. #, etc.			100000		1 TESS (122 STEEL COLD) (127 CO	
Suite, Apt. #, etc.  City & State			City & State			01262006	Chg-LLC	CR2E083 (11/05)	plied For
CAY O SIGN						20-2	422131	_	ot Applicable
2ip			Zip	( sur	ntry	<u> </u>	of Status Desired	\$5.00 Add	
	6. Name	and Address of Current	Registered Agent	Name	7. Name and	Address of New Re	egistered Agent		
MATTEIS,	JOHN J								. <u> </u>
29 S.E. 5TH STREET BOCA RATON, FL 33432					Street Address	(P.O. Box Numb	er is Not Acceptable	) 	
					City			FL Zip Cod	le l
6. The above	named enti	ly submits this statement for	or the purpose of changing i	ls register	ed office or registe	ered agent, or bo	th, in the State of Flo		and accept
<ol><li>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.</li></ol>									
SIGNATURE Scotters had a protect name of received name of received down and tall 6 acceptant. (NOTE: Received Accest scorely required whith revisitation)  DATE									
Signature, typed or privided nerms of regulatored agains and table if expectation. (NOTE: Registered Again signature required whith revitation) DATE									
FI O	iling Fee ue by Ma	ls \$50.00 y 1, 2006						e check payable to Department of Stat	•
0.		MANAGING MEMB	ERS/MANAGERS	10.			ADDITIONS/	CHANGES	
TITLE	MGRM	TARV TRAIL INC	Delete	TITI				Change	Addition
NAME J.H. MILITARY TRAIL, INC. STRET ADDRESS 29 S.E. 5TH STREET					EET ADDRESS				
CITY-SI-OP BOCA RATON, FL 33432				ατ	Y-ST-2P				
TITLE		·	☐ Detete	חוו	- 1			☐ Change	Addition
NAME STREET ADDRESS	1			STR	NE Bet acoress				
CITY-57-20°	<u> </u>				Y-ST-ZP				
TITLE			C Delete	m	LE .			Change	Addition
NAME	ĺ			W.	VE LET ADDRESS				
STREET ADDRESS CITY-ST-ZIP					Y-ST-2P				
TILE			☐ Detete	III	LE .	*****		☐ Change	Addition
NAME	ł			W					
STREET ADDRESS					EET ADORESS Y-ST-ZIP				
nne			☐ Delete	m	<del></del>			☐ Change	Addition
NAME				W	_				
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TITLE	<del> </del>		☐ Oriete	מת 💮				Change	Addition
HAME			□ orar	MA	•			C con-	
STREET ACCRESS	ł				REET ACCORESS				
CITY-SI-ZIP	<u></u>				Y-ST-ZDP	- 1- Observe	Davies Courses 11	alban angli manan 1 f	
11. I hereby certify that the information supplied with this fitting 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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.									
SIGNATURE: And Maris 2-8-06									
1	CONTRACT OF	AND THE PARTY OF T	OF SHIPPING SHAPPING SHIPPING S	MANAGES (	ALCOHOLDEN		Date	Distante Phone F	



March 2, 2006

COPENHAGEN W.H. LLC 29 S.E. 5TH STREET BOCA RATON, FL 33432

Subject: COPENHAGEN W.H. LLC

Reference Number:

£05000016860

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$55.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/JE ANNUAL REPORTS SECTION