## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **FILED** Feb 27, 2006 8:00 am Secretary of State 02-10-2006 90170 012 \*\*\*\*50.00

1. Entity Name	MENT # L0500003 ÅL ESTATE HOLDINGS,					02-10-20	06 901 70 01	.2 **	***50.00
Principal Place of Business 1 1445 OHANU CIRCLE BOYNTON BEACH, FL 33437		Mailing Address 11445 OHANU CIRCLE BOYNTON BEACH, FL 33437					30001305		
2. Principal P	lace of Business	3. Mailing Address	_	·					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01312006	Chg-LLC	CR2E083 (1	1/05)	
City & State		City & State			4. FEI Number コローイスト				plied For of Applicable
Zip	Country	Zip	Counti	ry	1	of Status Desired	□ \$5.0 Fee R	O Add	litional
	6. Name and Address of Curre	nt Registered Agent		Name	7. Name and	Address of New R	egistered Agent		
ELLIS, SÉ	THE ESQ	<del>-</del> ·	-{:			<del></del> _	<del>-</del>		<u></u>
SETH E. E 2385 EXEC	CUTIVE CENTER DRIVE, SU	TE 190		Street Address (P.O. Box Number is Not Acceptable)					
BOCA RATON, FL 33431			-	City		<del></del>	FL Zi	p Code	
8. The above	named entity submits this statement	for the purpose of changing its	s registere	d office or registe	ered agent, or both	, in the State of Flo		with,	and accept
	ions of registered against	>							
the obligati		int and title if applicable. (MO	TE: Registered	Agent signature require	od when reinstating)		DATE		<u> </u>
the obligation	ions of registered against	ing and idle if applicable. (NO	TE: Registered	Agent signature require	oct when reinstating)		DATE  a check payable  Department of		
the obligation of the control of the	Spriker, typed or printed have of registered so ling Pee is \$50.00 ue by May 1, 2006	BERS/MANAGERS	10.	Agent signature require	od when reinstating)		a check payable Department of	State	
the obligation of the control of the	Spriker, typed or printed have of registered sprinted by May 1, 2006	BERS/MANAGERS Delete	10. TITLE NAME STREE		od when reinstating)	Florida	a check payable Department of	State	Addition
SIGNATURE  FI DI  9.  TITLE NAME STREET ADDRESS	Ing Fee is \$50.00  WANAGING MEM  MGRM  CIRILLIO, JOSEPH A  11445 OHANU CIRCLE  BOYNTON BEACH, FL 33437  MGRM  CIRILLO, MARGARET A  11445 OHANU CIRCLE	BERS/MANAGERS Delete	10. TITLE NAME STREE CITY- TITLE NAME STREE	T ADDRESS ST-ZIP	od when sainarating)	Florida	a check payable Department of	State	
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9.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE KAME STREET ADDRESS CITY-ST-ZIP TITLE KAME STREET ADDRESS CITY-ST-ZIP TITLE KAME STREET ADDRESS	Ing Fee is \$50.00  WANAGING MEM  MGRM  CIRILLIO, JOSEPH A  11445 OHANU CIRCLE  BOYNTON BEACH, FL 33437  MGRM  CIRILLO, MARGARET A  11445 OHANU CIRCLE	BERS/MANAGÉRS Delete	10. TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME TITLE NAME TITLE NAME CITY- TITLE NAME TITLE NAME TITLE	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	od when reinstiting)	Florida	a check payable Department of CHANGES	State	Addition
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 14, 2006

J & M REAL ESTATE HOLDINGS, LLC 11445 OHANU CIRCLE BOYNTON BEACH, FL 33437

Subject: J & M REAL ESTATE HOLDINGS, LLC

Reference Number:

/L05000038370

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; 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.

/CJ ANNUAL REPORTS SECTION