



**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 19, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000055723</b> 1. Entity Name CMDS VENTURES "LLC"	
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Principal Place of Business 8903 GLADES ROAD A8 BOCA RATON, FL 33434	Mailing Address 8903 GLADES ROAD A8 BOCA RATON, FL 33434
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**DO NOT WRITE IN THIS SPACE**



01102007 No Chg-LLC      CR2E083 (11/05)

4. FEI Number 20-2954856	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  STERNBERG, ALAN B 12310 SW 113 AVE MIAMI, FL 33176	<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

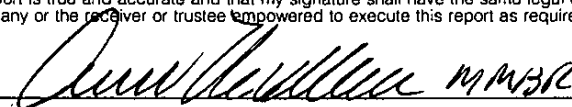
**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM NEEDLEMAN, ARNOLD E 3845 ST. JAMES WAY BOCA RATON, FL 33434
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STERNBERG, ALAN B 12310 SW 113 AVE MIAMI, FL 33176
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03/29/07-80019-021 55.00

**DO NOT WRITE  
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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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:**  **mmbr** **3/15/07**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #