

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000055723

Entity Name: CMDS VENTURES "LLC"

FILED
Jun 25, 2009
Secretary of State

Current Principal Place of Business:

8903 GLADES ROAD
A8
BOCA RATON, FL 33434

Current Mailing Address:

8903 GLADES ROAD
A8
BOCA RATON, FL 33434

New Principal Place of Business:

8903 GLADES ROAD
B1
BOCA RATON, FL 33434

New Mailing Address:

8903 GLADES ROAD
B1
BOCA RATON, FL 33434

FEI Number: 20-2954856 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

STERNBERG, ALAN B
12310 SW 113 AVE
MIAMI, FL 33176 US

Name and Address of New Registered Agent:

STERNBERG, ALAN B
442 PALM COURT
NAPLES, FL 34108 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: _____

06/25/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NEEDLEMAN, ARNOLD E
Address: 3845 ST. JAMES WAY
City-St-Zip: BOCA RATON, FL 33434

Title: MGRM () Delete
Name: STERNBERG, ALAN B
Address: 12310 SW 113 AVE
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: STERNBERG, ALAN B
Address: 442 PALM COURT
City-St-Zip: NAPLES, FL 34108

I hereby certify that the information supplied with this filing does not qualify 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: ARNOLD NEEDLEMAN

DR.

06/25/2009

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