

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000071791

Entity Name: JW BRED LLC

FILED  
May 02, 2006  
Secretary of State

## Current Principal Place of Business:

5670 OAKTREE AVE  
HOLLYWOOD, FL 33312

## New Principal Place of Business:

## Current Mailing Address:

5670 OAKTREE AVE  
HOLLYWOOD, FL 33312

## New Mailing Address:

FEI Number: FEI Number Applied For (X) 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:

KAUFMAN, BONNIE  
5670 OAKTREE AVE  
HOLLYWOOD, FL 33312 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: KAUFMAN, BONNIE  
Address: 5670 OAKTREE AVE  
City-St-Zip: HOLLYWOOD, FL 33312

Title: MGRM ( ) Delete  
Name: KLEMPNER, JOAN  
Address: 3625 N. COUNTRY CLUB DR.  
City-St-Zip: AVENTURA, FL 33180

Title: MGRM ( ) Delete  
Name: KESSLER, RITA  
Address: 21230 NE 24TH CT  
City-St-Zip: NORTH MIAMI BEACH, FL 33180

Title: MGRM ( ) Delete  
Name: FREIDMAN, WENDY  
Address: 3625 N. COUNTRY CLUB DR. #1907  
City-St-Zip: AVENTURA, FL 33180

## ADDITIONS/CHANGES:

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

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

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

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

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: BONNIE KAUFMAN

MRS

05/02/2006

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