## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000081315

Entity Name: CPW & LL, INC.

FILED Apr 29, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

817 SOUTH UNIVERSITY DRIVE SUITE 101 PLANTATION, FL 33324

**Current Mailing Address: New Mailing Address:** 

817 SOUTH UNIVERSITY DRIVE SUITE 101 PLANTATION, FL 33324

FEI Number: 65-1040783 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SINGER, MICHAEL S ESQ SINGER, MICHAEL S ESQ 3801 PGA BOULEVARD 1201 US HIGHWAY ONE SUITE 240A NORTH PALM BEACH, FL 33408 SUITE 604

PALM BEACH GARDENS, FL 33410 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: MICHAEL S. SINGER, ESQ 04/29/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition POY-WING, CELINA MD

POY-WING, CELINA MD Name: Name:

817 SOUTH UNIVERSITY DRIVE SUITE 101 817 SOUTH UNIVERSITY DRIVE SUITE 101 Address: Address:

City-St-Zip: PLANTATION, FL 33324 City-St-Zip: PLANTATION, FL 33324

Title: () Delete Title: () Change () Addition

Name: LARRAHONDO, LEONARDO Name: 817 SOUTH UNIVERSITY DRIVE SUITE 101 Address: Address: PLANTATION, FL 33324 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: CELINA POY-WING 04/29/2005