## **→ 2006 FOR PROFIT CORPORATION** ANNUAL REPORT

**SIGNATURE:** 

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## May 05, 2006 8:00 am Secretary of State 05-05-2006 90168 033 \*\*\*150.00 DOCUMENT # P04000084627 1. Entity Name 82 COMMERCIAL GROUP, INC. Principal Place of Business Mailing Address 800 W CYPRESS CREEK ROAD 800 W CYPRESS CREEK ROAD 470 470 FORT LAUDERDALE, FL 33309 FORT LAUDERDALE, FL 33309 2. Principal Place of Business 3. Mailing Address 800 W. CYPRESS CREEK RD 800 W. CYPRESS CREEK RD. Suite, Apt. #, etc Suite, Apt. #, etc 04282006 CR2E034 (11/05) Cha-F SUITE 465 SUITE\_465 City & State 4. FEI Number Applied For City & State FORT LAUDERDALE, FL FORT LAUDERDALE, FL 27-0094138 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 33309 33309 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LEGEL, LARRY Street Address (P.O. Box Number is Not Acceptable) 800 W CYPRESS CREEK ROAD 470 FORT LAUDERDALE, FL 33309 Zip Code FL 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. STD I\_ Change ☐ Addition TITLE Delete TITLE LEGEL, LARRY NAME NAME 800 W CYPRESS CREEK ROAD, SUITE 470 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE, FL 33309 CITY-ST-ZIP DPSR DPSR TITLE X Change ☐ Addition Delete REYNAERT, JEROME REYNAERT, JAROME NAME NAME STREET ADDRESS 800 W CYPRESS CREEK RD #470 STREET ADDRESS P.O. BOX 1059 CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE, FL 33309 ALVA, FL 33920 □ Delete TITLE ☐ Addition TITLE STERLACCI, JOSEPH M NAME NAME STREET ADDRESS 800 W CYPRESS CREEK RD #470 STREET ADDRESS 14130 DUKE WAY CITY-ST-ZIP FORT LAUDERDALE, FL 33309 CITY-ST-ZIP ALVA, FL 33920 X Change Continue Con TITLE ☐ Delete TITLE HOPKINS, JR, WILLIAM F NAME NAME STREET ADDRESS 800 W CYPRESS CREEK RD #470 STREET ADDRESS 1250 GALLEON DR. FORT LAUDERDALE, FL 33309 CITY-ST-ZIP NAPLES, FL 33939 CITY-ST-ZIP ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

RY LEGE

NAME OF SIGNING OFFICER OR DIRECTOR

ecretar

4.28.6

Daytime Phone #

FILED