

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000002460

FILED
Jan 05, 2005
Secretary of State

Entity Name: A1 BODY REPAIR CENTERS OF DEERFIELD, LLC

Current Principal Place of Business:

4400 N. POWERLINE ROAD
DEERFIELD BEACH, FL 33073

New Principal Place of Business:

Current Mailing Address:

4400 N. POWERLINE ROAD
DEERFIELD BEACH, FL 33073

New Mailing Address:

FEI Number: 45-0500798

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMBY, LOUIS III
321 ROYAL POINCIANNA PLAZA, SOUTH
PALM BEACH, FL 33480 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/MEMBERS:

Title: MGR () Delete
Name: SALVATORE, MICHAEL P
Address: 5801 NW 62 STREET
City-St-Zip: PARKLAND, FL 33067

Title: MGR () Delete
Name: JIMENEZ, CRISTOBAL J VP
Address: 6460 NW 62 TERR
City-St-Zip: PARKLAND, FL 33067

Title: MGR () Delete
Name: GARCIA, JUAN F T
Address: 3981 SW 147TH AVENUE
City-St-Zip: MIRAMAR, FL 33027

Title: MGRM () Delete
Name: JIMENEZ, BERTA B S
Address: 6460 NW 62 TERR
City-St-Zip: PARKLAND, FL 33067

Title: MGRM () Delete
Name: SALVATORE, DEBRA VS
Address: 5801 NW 62 STREET
City-St-Zip: PARKLAND, FL 33067

ADDITIONS/CHANGES:

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

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

Title: MGR (X) Change () Addition
Name: JIMENEZ, ROBERT T
Address: 6460 NW 62ND STREET
City-St-Zip: PARKLAND, FL 33067

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 Section 119.07(3)(i), 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: DEBRA SALVATORE

VS

01/05/2005

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