

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000108015

Entity Name: MICHELLE AUTO PARTS LLC

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

1336 CENTER AVE
HOLLY HILL, FL 32117 US

New Principal Place of Business:

554 N. SEGRAVE ST.
DAYTONA BEACH, FL 32117 US

Current Mailing Address:

1336 CENTER AVE
HOLLY HILL, FL 32117 US

New Mailing Address:

554 N. SEGRAVE ST.
DAYTONA BEACH, FL 32117 US

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:

JOSEFOW, HENRY J JR
3858 SOUTH ATLANTIC AVE
DAYTONA BEACH SHORES, FL 32127 US

Name and Address of New Registered Agent:

JOSEFOW, HENRY J JR
3858 SOUTH ATLANTIC AVE
DAYTONA BEACH SHORES, FL 32118 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: _____

Electronic Signature of Registered Agent

05/01/2006

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JOSEFOW, HENRY J JR
Address: 3858 SOUTH ATLANTIC AVE
City-St-Zip: DAYTONA BEACH SHORES, FL 32127 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JOSEFOW, HENRY J JR
Address: 3858 SOUTH ATLANTIC AVE
City-St-Zip: DAYTONA BEACH SHORES, FL 32118 US

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: HENRY JOSEFOW JR. _____

D

05/01/2006

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