

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000029804

FILED
Jun 16, 2009
Secretary of State

Entity Name: OPA LOCKA AUTOMOTIVE CENTER, LLC

Current Principal Place of Business:

8548 GLENCAIRN LANE
MIAMI LAKES, FL 33014

New Principal Place of Business:

8548 GLENCAIRN LANE
MIAMI LAKES, FL 33016

Current Mailing Address:

8548 GLENCAIRN LANE
MIAMI LAKES, FL 33014

New Mailing Address:

8548 GLENCAIRN LANE
MIAMI LAKES, FL 33016

FEI Number: 20-8741945 **FEI Number Applied For ()** **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:

TORRES, PETE
8548 GLENCAIRN LANE
MIAMI LAKES, FL 33014 US

Name and Address of New Registered Agent:

TORRES, PETE
8548 GLENCAIRN LANE
MIAMI LAKES, FL 33016 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

06/16/2009

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: TORRES, PETE
Address: 8548 GLENCAIRN LANE
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: TORRES, PETE
Address: 8548 GLENCAIRN LANE
City-St-Zip: MIAMI LAKES, FL 33016

I hereby certify that the information supplied with this filing does not qualify 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: PETE TORRES

MGR

06/16/2009

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