

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000115184

Entity Name: ELITE CAR CARE LLC

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

1155 NE 137TH STREET
502
NORTH MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

1155 NE 137TH STREET
502
NORTH MIAMI, FL 33161

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)
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:

Name and Address of New Registered Agent:

COICOU, GEORGE
1155 NE 137TH STREET
502
NORTH MIAMI, FL 33161 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

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: COICOU, DANIEL
Address: 1155 NE 137TH STREET APT. 502
City-St-Zip: MIAMI, FL 33161

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

Title: MGR () Delete
Name: MARCELUS, JACLAIN
Address: 1155 NE 137TH STREET APT. 502
City-St-Zip: MIAMI, FL 33161

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

Title: MGR () Delete
Name: OSBORNE, STEPEHN A
Address: 153 NE 116 ST
City-St-Zip: MIAMI, FL 33161

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

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: STEPHEN OSBORNE

MGR

05/01/2008

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