2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # M0000000149

1. Entity Name AF MOTORS, L.L.C.



Principal Place of Business

4306 PABLO OAKS COURT IACKSONVILLE, FL 32224

Mailing Address

PO BOX 16469

JACKSONVILLE, FL 32245-646

FILED Mar 24, 2006 08:00 AM Secretary of State



03172006 No Chg-LLC

CR2E083 (11/05)

4.	FE)	Nur	nbe	1	
	59	-3	604	421	4

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331

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	bave named entity submits this statement for the purpose of cha pligations of registered agent.	anging its registered office or registered agent, or both, in the	State of Florida. I am familiar with, and accept			
SIGNATU	JRE	(NOTE: Registered Agent signature regulated when retriauting)	DATE			
Filing Fee is \$50.00 Due by May 1, 2006						
9.	MANAGING MEMBERS/MANAGERS					
TITLE	MGR	.	3			
	TOLUL OLLABOLE O	3	•			

NAME TOMM, CHARLIE C 4306 PABLO OAKS CT STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32224 TITLE MARLETTE, LINDA NAME STREET ACCURESS 4306 PABLO OAKS CT City-St-189 JACKSONVILLE, FL 32224 515) F STARKE STREET ADDRESS CATY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

(1111/11/14/29/287) 50 (0) THE BRIDE - 021 50.00

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11. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under outh; 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.

STREET ADDRESS CITY-ST-ZIP

NATED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3.21.06