

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90073 022 ****50.00

DOCUMENT # L02000003950

1. Entity Name
WESTSIDE MOTORS LTD. CO.



Principal Place of Business
4015 WEST 16TH AVENUE
HIALEAH, FL 33012

Mailing Address
4015 WEST 16TH AVENUE
HIALEAH, FL 33012

24060879



2. Principal Place of Business
4015 W 16th Ave
Suite, Apt. #, etc.

3. Mailing Address
4015 W 16th Ave
Suite, Apt. #, etc.

04292004 Chg-LLC CR2E083 (10/03)

City & State
Hialeah, FL
Zip 33012 Country US

City & State
Hialeah, FL
Zip 33012 Country US

4. FEI Number
01-0622356

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Perez, Joseph H.
2100 NW 99TH AVE.
MIAMI, FL 33172

7. Name and Address of New Registered Agent

Name Perez, Joseph H.
Street Address (P.O. Box Number is Not Acceptable)
1150 NW 72nd Ave
Suite 500
City Miami FL Zip Code 33126

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Joseph H. Perez*
Signature of registered agent (if applicable)

(NOTE: Registered Agent signature required when reissuing)

04/28/2004
DATE

Filing Fee is \$50.00
Due by May 1, 2004

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM	<input checked="" type="checkbox"/> Delete
NAME	Perez, Joseph H.	
STREET ADDRESS	9700 NW 17 ST	
CITY-ST-ZIP	MIAMI, FL 33172	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS/CHANGES

TITLE	MGRM	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Zerep Holdings, LLC	
STREET ADDRESS	1150 NW 72nd Ave, Ste 500	
CITY-ST-ZIP	Miami, FL 33126	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), 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 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: *Joseph H. Perez*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

04/28/2004 (305) 994-9494
Date Daytime Phone #