

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000000537

FILED  
Apr 30, 2007  
Secretary of State

**Entity Name:** FIRST CLASS CAR CARE CENTER, L.L.C.

**Current Principal Place of Business:**

8090 GLADIOULUS DRIVE  
FORT MYERS, FL 33908

**New Principal Place of Business:**

**Current Mailing Address:**

8090 GLADIOULUS DRIVE  
FORT MYERS, FL 33908

**New Mailing Address:**

**FEI Number:** 65-0972820

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STRAUSS, DANIEL  
3335 TWIN LAKES LANE  
SANIBEL, FL 33957 US

**Name and Address of New Registered Agent:**

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:**

Title: MGRM ( ) Delete  
Name: STRAUSS, DANIEL  
Address: 3335 TWIN LAKES LANE  
City-St-Zip: SANIBEL, FL 33957

Title: MGR ( ) Delete  
Name: MARISELA BERMUDEZ-ST, RAUSS  
Address: 3335 TWIN LAKES LANE  
City-St-Zip: SANIBEL, FL 33957

**ADDITIONS/CHANGES:**

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

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:** MARISELA BERMUDEZ-STRAUSS

MGR

04/30/2007

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