

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000000537

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

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

**Current Principal Place of Business:**

8090 GLADIOLUS DRIVE  
FORT MYERS, FL 33908

**New Principal Place of Business:**

8090 GLADIOLUS DRIVE  
FORT MYERS, FL 33908

**Current Mailing Address:**

8090 GLADIOLUS DRIVE  
FORT MYERS, FL 33908

**New Mailing Address:**

8090 GLADIOLUS DRIVE  
FORT MYERS, FL 33908

**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  
**Name:** STRAUSS, DANIEL  
**Address:** 3335 TWIN LAKES LANE  
**City-St-Zip:** SANIBEL, FL 33957

**Title:** MGR  
**Name:** MARISELA BERMUDEZ-STRAUSS  
**Address:** 3335 TWIN LAKES LANE  
**City-St-Zip:** SANIBEL, FL 33957

I hereby 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:** DANIEL STRAUSS

MGRM

04/27/2012

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