# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**May 04, 2007 08:00 A**
**Secretary of State**

DOCUMENT # L00000008346

1. Entity Name
RIZZO'S PALM BEACH LINCOLN MERCURY, LLC

| Principal Place of Business | Mailing Address |
|---|---|
| 2301 OKEECHOBEE BLVD.<br>WEST PALM BEACH, FL 33409 | 2301 OKEECHOBEE BLVD.<br>WEST PALM BEACH, FL 33409 |

**DO NOT WRITE IN THIS SPACE**

05012007 No Chg-LLC CR2E083 (11/05)

4. FEI Number
59-3659859
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

RIZZO, ROBERT C
2301 OKEECHOBEE BLVD.
WEST PALM BEACH, FL 33409

**DO NOT WRITE IN THIS SPACE**

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is $50.00**
**Due by May 1, 2007**

U00000761317
05/25/07-80050-016 50.00

| 9. | MANAGING MEMBERS/MANAGERS |
|---|---|
| TITLE | MGRM |
| NAME | RIZZO, ROBERT G |
| STREET ADDRESS | 2301 OKEECHOBEE BLVD |
| CITY-ST-ZIP | WEST PALM BEACH, FL 33409 |
| TITLE | MGR |
| NAME | RIZZO, ROBERT |
| STREET ADDRESS | 2301 OKEECHOBEE BLVD |
| CITY-ST-ZIP | WEST PALM BEACH, FL 33409 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
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| CITY-ST-ZIP | |

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11. I hereby certify that the information supplied with this filing does not qualify 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 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:** X _____ 4/28/07 561-683-8520
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #