2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 25, 2005
Secretary of State

DOCUMENT# L01000002044

Entity Name: GABLEWAY EXXON, LLC

Current Principal Place of Business:

5701 S.W. 24 STREET
MIAMI, FL 33155

New Principal Place of Business:

Current Mailing Address:

5701 S.W. 24 STREET
MIAMI, FL 33155

New Mailing Address:

4937 S.W. 75 AVE.
MIAMI, FL 33155

FEI Number: 65-1079941 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MIAMI CORPORATE SYSTEMS, INC.
283 CATALONIA AVE. 2ND FLOOR
CORAL GABLES, FL 33134 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/MEMBERS:

Title: MGR ( ) Delete
Name: ALONSO, RAMON
Address: 5701 S.W. 24 STREET
City-St-Zip: MIAMI, FL 33155

Title: MGR ( ) Delete
Name: LUIS, ALONSO
Address: 8853 SW 59TH ST
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: ALONSO, RAMON
Address: 4937 S.W. 75 AVE.
City-St-Zip: MIAMI, FL 33155

Title: MGR (X) Change ( ) Addition
Name: LUIS, ALONSO
Address: 4937 S.W. 75 AVE.
City-St-Zip: MIAMI, FL 33155

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LUIS ALONSO MGR 01/25/2005

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