2004 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
2004 JAN 27 PM 1:59
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DOCUMENT # L01000003520

1. Corporation Name
JEFF'S AUTO REPAIR, L.L.C.

Principal Place of Business
1300 W. McNAB RD.
FT LAUDERDALE, FL 33309

Mailing Address SAME

24001456 [redacted]

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

3. Date Incorporated or Qualified: 3-7-01	3a. Date of Last Report: 2003
4. FEI Number: 65-1081556	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

MORRISON, RICHARD W.
4875 N. FEDERAL HWAY., 10TH FL
FT. LAUDERDALE, FL 33308

10. Name and Address of New Registered Agent

81 Name: PETER COLLINS
82 Street Address (P.O. Box Number is Not Acceptable): 1300 W. McNAB RD.
83
84 City: FT LAUDERDALE FL 85 Zip Code: 33309

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE ✓ [signature] DATE 01/01/04

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	MGRM MEMBER ☒ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	ROBERT O'BRIEN	1.2 NAME	
STREET ADDRESS	~~1300 W. McNAB RD.~~	1.3 STREET ADDRESS	4360 NE 11 AVE
CITY-ST-ZIP	~~FT LAUDERDALE FL 33309~~	1.4 CITY-ST-ZIP	FT LAUDERDALE, FL 33334
TITLE	MGRM MEM ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	JEFFREY LIMPERT	2.2 NAME	
STREET ADDRESS	1300 W. McNAB RD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33309	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	MGRM MEMBER ☐ Change ☒ Addition
NAME		3.2 NAME	PETER COLLINS
STREET ADDRESS		3.3 STREET ADDRESS	1300 W. McNAB RD.
CITY-ST-ZIP		3.4 CITY-ST-ZIP	FT LAUDERDALE, FL 33309
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ✓ [signature] MEMBER 01/01/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE

CR2E037 (9/96)