# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Feb 25, 2005 8:00 am**
**Secretary of State**
01-21-2005 90097 013 ****50.00

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DOCUMENT # L01000003520

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

| Principal Place of Business | Mailing Address |
|---|---|
| 1300 W. MCNAB RD.<br>FT LAUDERDALE, FL 33309 | 1300 W. MCNAB RD.<br>FT LAUDERDALE, FL 33309 |

01132005 Chg-LLC CR2E083 (10/03)

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |
| Zip / Country | Zip / Country |

4. FEI Number
65-1081556
☐ Applied For
☐ Not Applicable

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

| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent |
|---|---|
| COLLINS, PETER<br>1300 W. MCNAB RD.<br>FT LAUDERDALE, FL 33308 | Name: Linda Moreno<br>Street Address (P.O. Box Number is Not Acceptable): 10863 Denver Drive<br>City: Cooper City FL Zip Code: 33026 |

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: Linda Moreno 1/17/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is $50.00**
**Due by May 1, 2005**

**Make check payable to Florida Department of State**

| 9. MANAGING MEMBERS / MANAGERS | | | 10. ADDITIONS / CHANGES | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | MGRM<br>O'BRIEN, ROBERT<br>4360 NE 11 AVE<br>FT LAUDERDALE, FL 33334 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | Mgr.<br>Linda Moreno<br>10863 Denver Drive<br>Cooper City, FL. 33026 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | MGRM<br>LIMPERT, JEFFREY<br>1300 W. MCNAB RD.<br>FT LAUDERDALE, FL 33309 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | Mgr.<br>Beth Meyer<br>8768 SW 3rd St #101<br>Pembroke Pines, FL. 33025 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | MGRM<br>COLLINS, PETER<br>1300 W. MCNAB RD.<br>FT LAUDERDALE, FL 33309 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
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| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |

11. 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 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:** Linda Moreno 1/17/05 954 973 4414
SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #