2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000009817

Entity Name: AUTOKRAZE L.L.C.

FILED May 01, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1800 SE 10TH AVENUE 5240 S. UNIVERSITY DRIVE

STE # E105 STE 240 FORT LAUDERDALE, FL 33316 DAVIE, FL 33328

New Mailing Address: Current Mailing Address:

1800 SE 10TH AVENUE 5240 S. UNIVERSITY DRIVE

STE 240 STE #105 FORT LAUDERDALE, FL 33316 DAVIE, FL 33328

FEI Number: 02-0684787 FEI Number Applied For () FEI Number Not Applicable ()

Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DUBOW, JASON ESQ 215 NORTH FEDERAL HIGHWAY DANIA BEACH, FL 33004

MANAGING MEMBERS/MANAGERS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES:

Title: MGR () Delete (X) Change () Addition

MOORE, KEVIN Name: Name: MOORE, KEVIN

Address: 1800 SE 10TH AVENUE STE 240 Address: 5240 S. UNIVERSITY DRIVE STE# E105 FORT LAUDERDALE, FL 33316 **DAVIE, FL 33328**

City-St-Zip: City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name: BENJAMIN, PAUL H MGRM Name: BENJAMIN, PAUL H MGRM

Address: 1800 SE 10TH AVENUE STE 240 Address: 5240 S. UNIVERSITY DRIVE STE # E105

City-St-Zip: FORT LAUDERDALE, FL 33316 City-St-Zip: **DAVIE, FL 33328**

Title: MGRM () Delete Title: MGRM (X) Change () Addition BENJAMIN, CAROLYN A MGRM Name: BENJAMIN, CAROLYN A MGRM Name: 5240 S. UNIVERSITY DRIVE STE# E105 Address: 1800 SE 10TH AVENUE STE 240 Address:

City-St-Zip: FORT LAUDERDALE, FL 33316 City-St-Zip: DAVIE, FL 33328

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: PAUL HARRY BENJAMIN **MGRM** 05/01/2007