

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90030 046 ****50.00

DOCUMENT # L01000017209

1. Entity Name
CHECKERED FLAG IMPORTS, L.L.C.



Principal Place of Business
3300 SW 14TH PLACE, BAY 6
BOYNTON BEACH, FL 33426

Mailing Address
3300 SW 14TH PLACE, BAY 6
BOYNTON BEACH, FL 33426



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04122006 Chg-LLC CR2E083 (11/05)

4. FEI Number
65-0795279

Applied For
Not Applicable

5. 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

SCHONE, LARRY T
72 N.E. 5TH AVE.
DELRAY BEACH, FL 33483

Name

Street Address (P.O. Box Number is Not Acceptable)

151 NW 1st Ave

Delray Beach

FL

Zip Code
33444

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

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, 2006

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
MULLER, KEVIN
3300 SW 14TH PLACE, BAY 6
BOYNTON BEACH, FL 334269034 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

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

[Signature]

Kevin Muller 4-17-06 501-344-2707