

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000022490

FILED  
Jul 21, 2005  
Secretary of State

Entity Name: AUTO PRO SERVICE CENTER, LLC

## Current Principal Place of Business:

2590 PALM AVE  
HIALEAN, FL 33210 US

## New Principal Place of Business:

2590 PALM AVE  
HIALEAH, FL 33010 US

## Current Mailing Address:

2590 PALM AVE  
HIALEAN, FL 33210 US

## New Mailing Address:

2590 PALM AVE  
HIALEAH, FL 33010 US

FEI Number: 02-0533543      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:

LECUMBERRY, SYLVIA M  
2590 PALM AVE  
HIALEAN, FL 33210 US

## Name and Address of New Registered Agent:

LECUMBERRY, SYLVIA M  
2590 PALM AVE  
HIALEAN, FL 33010 US

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: SYLVIA LECUMBERRY

07/21/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: LECUMBERRY, SYLVIA M  
Address: 10001 SW 70TH ST.  
City-St-Zip: MIAMI, FL 33173 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Change (X) Addition  
Name: MOZAS, ANGEL  
Address: 2590 PALM AVE  
City-St-Zip: HIALEAH, FL 33010

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: SYLVIA LECUMBERRY

MGRM

07/21/2005

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