

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

000577

DOCUMENT # L02000004522

1. Entity Name.

ADVANCED AUTOMOTIVE GROUP, L.L.C.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 DEC -8 PM 5:35

Principal Place of Business

4915 SOUTH TAMiami TRAIL
SARASOTA FL 34231

Mailing Address

4915 SOUTH TAMiami TRAIL
SARASOTA FL 34231

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

☒ 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

TURFFS, ROBERT E
ROBERT E. TURFFS, P.A.
1444 FIRST STREET, SUITE B
SARASOTA FL 34236

Name

ANDREW GUENTHER

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

4915 South TAMiami TR.

City

SARASOTA

FL

Zip Code

34231

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

ANDREW GUENTHER

MGR

9/21/03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Florida Department of State
Due By September 24, 2003

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR
NAME GUENTHER, ANDREW
STREET ADDRESS 4915 SOUTH TAMiami TRAIL
CITY-ST-ZIP SARASOTA FL 34231

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
200023643942
10/08/03--01029--023 **\$5.00

TITLE MGR
NAME BONET, LAWRENCE
STREET ADDRESS 4915 SOUTH TAMiami TRAIL
CITY-ST-ZIP SARASOTA FL 34231

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
200023643942
12/08/03--01075--003 **\$100.00

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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:

ANDREW GUENTHER

9/21/03

941-925-2673

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (4/03)