

**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 07, 2004 8:00 am**  
**Secretary of State**

05-07-2004 90006 021 \*\*\*\*55.00

**DOCUMENT # L02000018473**

1. Entity Name  
**M R INTERNATIONAL AUTO SALES, LLC**



Principal Place of Business  
**3700 FIFTH AVENUE NORTH  
ST. PETERSBURG, FL 33713**

Mailing Address  
**5408 ST. JAMES DRIVE  
NEW PORT RICHEY, FL 34650**

**24067880**



04192004 No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**51-0429393**

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$5.00 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**DREW, KELLY  
5408 ST. JAMES DRIVE  
NEW PORT RICHEY, FL 34652**

**DO NOT WRITE  
IN THIS SPACE**

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, 2004**

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	RUSIECKI, MAREK
STREET ADDRESS	3700 FIFTH AVENUE NORTH
CITY-ST-ZIP	ST. PETERSBURG, FL 33713

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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:** \_\_\_\_\_

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

Date

Daytime Phone #

**Marek Rusiecki 4-21-04 727-328-0263**