2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

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Entity Name
MERICAN CAR CARE CENTER WEST, LLC

Principal Place of Business
12 MANATEE AVE.
BRADENTON, FL 34209

Mailing Address
6412 MANATEE AVE.
W. BRADENTON, FL 34209

01102006 No Chg-LLC CR2E083 (11/05)

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4. FEI Number
16-1631067
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CKMAN & WYCKOFF, P.A.
09 MANATEE AVE. WEST
ADENTON, FL 34209

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2006

MANAGING MEMBERS/MANAGERS

V
KALLIS, ZACKARY
ADDRESS 6412 MANATEE AVE. W
-ZIP BRADENTON, FL 34209

P
SHERWOOD, CHRISTOPHER
ADDRESS 6412 MANATEE AVE. W
-ZIP BRADENTON, FL 34209

S
KALLIS, JOHN
ADDRESS 640 MANATEE AEV. W
-ZIP BRADENTON, FL 34209

ADDRESS
-ZIP

ADDRESS
-ZIP

ADDRESS
-ZIP

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01/30/06--80081--006 50.00

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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: ZACK Kallis 1-20-06 941 794 5007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #