## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L02000030482

GLOBAL AUTOMOTIVE FINANCIAL SERVICES, L.L.C.



**FILED** Jan 22, 2007 08:00 AM Secretary of State

Principal Place of Business

837 E. NEW HAVEN AVENUE MELBOURNE, FL 32901

Mailing Address

P.O. BOX 121207 MELBOURNE, FL 32912-1207 US



01122007 No Chg-LLC

CR2E083 (11/05)

| FEI Number                       |  | Applied For                       |
|----------------------------------|--|-----------------------------------|
| 43-2002789                       |  | Not Applicable                    |
| 5. Certificate of Status Desired |  | \$5.00 Additional<br>Fee Required |

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BERTEL, FREDERICK 837 E. NEW HAVEN AVENUE MELBOURNE, FL 32901

SIGNATURE:

DO NOT WRITE IN THIS SPACE

| the obligations of registered agent.  |  |   |  |  |
|---------------------------------------|--|---|--|--|
| SIGNATURE.                            | Signature, typed or primed name of registered agent and title if applicable. | (NOTE: Registered Agent argitalure required when reinstating) | DATE                                     |  |
| F                                     | lling Fee is \$50.00<br>ue by May 1, 2007                                    |   |  |  |
| 9.                                    | MANAGING MEMBERS/MANAGERS  |   |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR<br>BERTEL, FREDERICK<br>140 3RD AVE<br>INDIALANTIC, FL 32903             |   | U00000595056<br>01/23/07-80024-007 50.00 |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP |  |   |  |  |
| NAME STREET ADDRESS CITY-ST-ZIP       |  | DO  | NOT WRITE                                |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP |  | 103   | THIS SPACE                               |  |
| TITLE NAME STREET ADDRESS CITY-S1-ZIP |  |   |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP |  |   |  |  |

11. I hereby certify that the information supplied with this filling 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 faceiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.