

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000035207

Entity Name: WEAUTOSHIP2.COM L.L.C.

FILED
Aug 03, 2005
Secretary of State

Current Principal Place of Business:

860 MAGUIRE RD.
OCOEE, FL 34761

New Principal Place of Business:

411 NORTH DONNELLY STR
PENTHOUSE 308
MT DORA, FL 32757

Current Mailing Address:

P.O. BOX 635
MT. DORA, FL 32757

New Mailing Address:

FEI Number: 59-5232098 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:

JECKOVICH, THOMAS
860 MAGUIRE RD
OCOEE, FL 34761 US

Name and Address of New Registered Agent:

JECKOVICH, THOMAS
411 NORTH DONNELLY STR
PENTHOUSE 308
MT DORA, FL 32756 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: TOM JECKOVICH

08/03/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: JECKOVICH, THOMAS
Address: 860 MAGUIRE RD
City-St-Zip: OCOEE, FL 34761

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: JECKOVICH, THOMAS
Address: PO BOX 635
City-St-Zip: MT DORA, FL 32756 US

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: TOM JECKOVICH

PRES

08/03/2005

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