


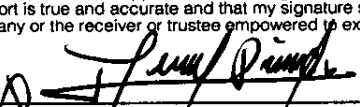


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 29, 2004 8:00 am
Secretary of State

03-29-2004 90555 013 ****50.00

DOCUMENT # L03000008808					
1. Entity Name AUTO ERRANTE COMPETITION, LLC Auto Errante Competition, LLC					
Principal Place of Business 1725 MAIN STREET STE. 205 WESTON, FL 33326			Mailing Address 1725 MAIN STREET STE. 205 WESTON, FL 33326		
2. Principal Place of Business 8328 NW 56 Street Suite, Apt. #, etc.		3. Mailing Address 8328 NW 56 Street Suite, Apt. #, etc.			
City & State MIAMI, Florida		City & State MIAMI, Florida		4. FEI Number 04-3745170	
Zip 33166		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent TOVAR, ILEANA ARIAS 1725 MAIN STREET STE. 205 WESTON, FL 33326			7. Name and Address of New Registered Agent Name Maxy Segundo Velasco Street Address (P.O. Box Number is Not Acceptable) 8328 NW 56 Street City MIAMI FL Zip Code 33166		
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  (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2004			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PINEDA, JUAN HERRERA 1725 MAIN STREET STE. 205 WESTON, FL 33326 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 8328 NW 56 St. MIAMI, FL 33166		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HERRERA, JORGE 1725 MAIN STREET STE. 205 WESTON, FL 33326 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 8328 NW 56 St. MIAMI, FL 33166		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR VELASCO, MAXY SEGUNDO 1725 MAIN STREET STE. 205 WESTON, FL 33326 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Maxy S. Velasco 8328 NW 56 St MIAMI, FL 33166		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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:  DATE _____ Daytime Phone # _____					