

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90101 002 ****50.00

DOCUMENT # L03000010717 1. Entity Name PRONTOWASH TOWN CENTER BOCA, LLC			
Principal Place of Business 634 NW 44 TER #104 DEERFIELD BEACH, FL 33442 US		Mailing Address 634 NW 44 TER #104 DEERFIELD BEACH, FL 33442 US	
2. Principal Place of Business 8500 SW 133 AVE		3. Mailing Address 8500 SW 133 AVE	
Suite, Apt. #, etc. APT 320		Suite, Apt. #, etc. APT 320	
City & State MIAMI FL		City & State MIAMI FL	
Zip 33183		Zip 33183	
Country US		Country US	
4. FEI Number 06-1687040		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent PERFETTI, RONALD 634 NW 44 TER #104 DEERFIELD BEACH, FL 33442		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>			
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE MGRM	NAME PRON TOWASH USA, LLC	TITLE MGRM	NAME PERFETTI, RONALD
STREET ADDRESS 634 NW 44 TER #104	CITY-ST-ZIP DEERFIELD BEACH, FL 33442	STREET ADDRESS 8500 SW 133 AVE. APT 320	CITY-ST-ZIP MIAMI FL 33183
TITLE MGRM	NAME KRUGOER, LAWRENCE	TITLE MGRM	NAME PERFETTI, RONALD
STREET ADDRESS 2533 BRICKELL AVE #1912	CITY-ST-ZIP MIAMI, FL 33129	STREET ADDRESS 8500 SW 133 AVE. APT 320	CITY-ST-ZIP MIAMI FL 33183
TITLE MGRM	NAME KRUGOER, LAWRENCE	TITLE MGRM	NAME PERFETTI, RONALD
STREET ADDRESS 2533 BRICKELL AVE #1912	CITY-ST-ZIP MIAMI, FL 33129	STREET ADDRESS 8500 SW 133 AVE. APT 320	CITY-ST-ZIP MIAMI FL 33183
TITLE MGRM	NAME KRUGOER, LAWRENCE	TITLE MGRM	NAME PERFETTI, RONALD
STREET ADDRESS 2533 BRICKELL AVE #1912	CITY-ST-ZIP MIAMI, FL 33129	STREET ADDRESS 8500 SW 133 AVE. APT 320	CITY-ST-ZIP MIAMI FL 33183
TITLE MGRM	NAME KRUGOER, LAWRENCE	TITLE MGRM	NAME PERFETTI, RONALD
STREET ADDRESS 2533 BRICKELL AVE #1912	CITY-ST-ZIP MIAMI, FL 33129	STREET ADDRESS 8500 SW 133 AVE. APT 320	CITY-ST-ZIP MIAMI FL 33183
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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		04/12/05 786-2691248 <small>Date Daytime Phone</small>	