

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

**FILED
Jul 11, 2007 08:00 AM
Secretary of State**

DOCUMENT # L03000017283 1. Entity Name PAUL CASTELLANO AUTO SALES, LLC	
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Principal Place of Business 1205 JACKSON ST. TAMPA, FL 33602	Mailing Address 1205 JACKSON ST. TAMPA, FL 33602
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DO NOT WRITE IN THIS SPACE



06132007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-3146016	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CASTELLANO, NELSON
719 W. ADALEE ST.
TAMPA, FL 33603

**DO NOT WRITE
IN THIS SPACE**

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

**Filing Fee is \$50.00
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CASTELLANO, NELSON S MGR 719 W ADALEE ST TAMPA, FL 33603
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11. 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: *Nelson Castellano* 7/8/07 813 223-6725
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #