

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000023516

**FILED**  
**Mar 24, 2010**  
**Secretary of State**

**Entity Name:** 5-POINTS TRANSMISSIONS, L.L.C.

**Current Principal Place of Business:**

2270 NE 62ND STREET  
FORT LAUDERDALE, FL 33308

**New Principal Place of Business:**

2434 SE 11 TH STREET  
POMPANO BEACH, FL 33062

**Current Mailing Address:**

2270 NE 62ND STREET  
FORT LAUDERDALE, FL 33308

**New Mailing Address:**

2434 SE 11 TH STREET  
POMPANO BEACH, FL 33062

**FEI Number:** 55-0837566

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GAGNE, PATRICK M  
2270 NE 62ND STREET  
FORT LAUDERDALE, FL 33308 US

**Name and Address of New Registered Agent:**

GAGNE, PATRICK M  
2434 SE 11 TH STREET  
POMPANO BEACH, FL 33062 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: \_\_\_\_\_

Electronic Signature of Registered Agent

03/24/2010

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GAGNE, PATRICK  
Address: 2434 SE 11 TH STREET  
City-St-Zip: POMPANO BEACH, FL 33062

I hereby 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: PATRICK GAGNE

MGR

03/24/2010

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