## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # L03000026448** 

1. Entity Name
PANAGGIO-BLOCH MOTORS, LLC



FILED Mar 02, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

2441 BELLEVUE AVE DAYTONA BEACH, FL 32114 2441 BELLEVUE AVE DAYTONA BEACH, FL 32114



## DO NOT WRITE IN THIS SPACE

02232007 No Chg-LLC CR2E083 (11/05)

 FEI Number
 Applied For

 32-0084472
 Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BLOCH, BRYAN 2441 BELLEVUE AVE DAYTONA BEACH, FL 32114

CITY-ST-ZIP

## DO NOT WRITE IN THIS SPACE

<ol><li>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.</li></ol>			
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE. Registered Agent signature required when reinstating)	DATE
F	illing Fee is \$50.00 Due by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PANAGGIO, MICHAEL 2441 BELLEVUE AVE. DAYTONA BEACH, FL 32114		U00000653948 03/13/07-80042-025 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BLOCH, BRYAN 2441 BELEVUE AVE. DAYTONA BEACH, FL 32114		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN :	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·		
TITLE NAME STREET ADDRESS			•

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 must be empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

alasina

8-11-3049

Daytime Phone #