


2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Feb 19, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000031978
1. Entity Name
PRIMA VISTA SERVICE STATION, LLC



Principal Place of Business 15300 NW 7TH AVE. MIAMI, FL 33169	Mailing Address 15300 NW 7TH AVE. MIAMI, FL 33169
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DO NOT WRITE IN THIS SPACE



02102005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 51-0486759	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
VOLANTE, GABRIEL
15300 NW 7TH AVE
MIAMI, FL 33169

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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, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR VOLANTE, GABRIEL 15300 NW 7TH AVE MIAMI, FL 33169
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02/19/05-80019-006 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Gabriel Volante* 02-16-05 (705) 688-9613

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE _____ Date _____ Daytime Phone # _____