


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 19, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L03000031978**


1. Entity Name  
**PRIMA VISTA SERVICE STATION, LLC**



Principal Place of Business      Mailing Address

**15300 NW 7TH AVE.  
 MIAMI, FL 33169**                      **15300 NW 7TH AVE.  
 MIAMI, FL 33169**

**DO NOT WRITE IN THIS SPACE**



02052008 No Chg-LLC      CR2E083 (12/07)

4. FEI Number <b>51-0486759</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**VOLANTE, GABRIEL  
 15300 NW 7TH AVE  
 MIAMI, FL 33169**

**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 reinstating)

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

L03000031544  
 02/27/09-80024-015 138.75

**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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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 606, Florida Statutes.

**SIGNATURE:** *Gabriel Volante*      *02-12-08*

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