

Rodrigo

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FILED
Aug 22, 2005 8:00 am
Secretary of State

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07-25-2005 90043 021 ****50.00

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L04000034687			
1. Entity Name RODRIGO'S AUTO REPAIR, LLC			
Principal Place of Business 4701 ORANGE DRIVE BLDG. 13 BAY 16-18 FT. LAUDERDALE, FL 33314		Mailing Address 4701 ORANGE DRIVE BLDG. 13 BAY 16-18 FT. LAUDERDALE, FL 33314	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number X 20-1088909		Applied For Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required		07182005 Chg-LLC CR2E083 (10/03)	
6. Name and Address of Current Registered Agent ALEMAN, JULIO A 654 WOODGATE LANE SUNRISE, FL 33326		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 relinquishing)			
Filing Fee is \$50.00 Due by September 7, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR RODRIGUEZ, RODRIGO A 4701 ORANGE DRIVE, BLDG 13 - BAY 16-18 FT. LAUDERDALE, FL 33314 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: X  MANAGER		02-21-05	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date	

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