2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 12, 2007
Secretary of State

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Entity Name: AUTO LUBE OF FT. PIERCE, LLC

Current Principal Place of Business:

2834 N.W. 12TH STREET
POMPANO BEACH, FL 33062

New Principal Place of Business:

2834 N.E. 12TH STREET
POMPANO BEACH, FL 33062

Current Mailing Address:

2834 N.W. 12TH STREET
POMPANO BEACH, FL 33062

New Mailing Address:

2834 N.E. 12TH STREET
POMPANO BEACH, FL 33062

FEI Number: 20-2065254 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BIERALS, GREG
2834 NW 12TH ST
POMPANO BEACH, FL 33062 US

Name and Address of New Registered Agent:

BIERALS, GREG
2834 NE 12TH ST
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: _____ 01/12/2007
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: D ( ) Delete
Name: BIERALS, GREG
Address: 2834 NW 12TH ST
City-St-Zip: POMPANO BEACH, FL 33062

Title: D ( ) Delete
Name: BIERALS, HORTENSE
Address: 2834 NW 12TH ST
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES:

Title: D (X) Change ( ) Addition
Name: BIERALS, GREG
Address: 2834 NE 12TH ST
City-St-Zip: POMPANO BEACH, FL 33062

Title: D (X) Change ( ) Addition
Name: BIERALS, HORTENSE
Address: 2834 NE 12 ST
City-St-Zip: POMPANO BEACH, FL 33062

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: GREG BIERALS D 01/12/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date