

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 30, 2006 8:00 am
Secretary of State

01-30-2006 90157 040 ****55.00

DOCUMENT # L04000056289 1. Entity Name PARTS & TECHNOLOGY, LLC					
Principal Place of Business 14359 MIRAMAR PARKWAY, #280 MIRAMAR, FL 33027-4134			Mailing Address 14359 MIRAMAR PARKWAY, #280 MIRAMAR, FL 33027-4134		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
REGALADO, JAVIER F 14359 MIRAMAR PARKWAY #280 MIAMI, FL 33027-4134				Name <u>Esteban Gonzalez</u> Street Address (P.O. Box Number is Not Acceptable) <u>14359 Miramar Pkwy # 280</u> City <u>Miramar</u> FL <u>33027</u>	
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 <u>Esteban Gonzalez</u> ESTEBAN GONZALEZ 1/18/06 <small>Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR REGALADO, JAVIER F 14359 MIRAMAR PARKWAY #280 MIAMI, FL 330274134		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Esteban Gonzalez 14359 Miramar Pkwy # 280 Miramar, FL 33027	
	<input checked="" type="checkbox"/> Delete			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
	<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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 608, Florida Statutes.					
SIGNATURE: <u>Esteban Gonzalez</u> ESTEBAN GONZALEZ 1/18/06 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					