

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000018753

FILED
Aug 14, 2006
Secretary of State

Entity Name: TRANSMISSIONS 4 LESS, L.C.

Current Principal Place of Business:

4701 SW 45TH ST., BLDG. 8, BAY 32, 34
DAVIE, FL 33314

New Principal Place of Business:

Current Mailing Address:

4701 SW 45TH ST., BLDG. 8, BAY 32, 34
DAVIE, FL 33314

New Mailing Address:

19321 NW 46 AVE
OPA LOCKA, FL 33055

FEI Number: 20-2432027 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GONZALEZ, ALEJANDRO
4701 SW 45TH ST., BLDG. 8, BAY 32, 34
DAVIE, FL 33314 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GONZALEZ, ALEJANDRO
Address: 4701 SW 45TH ST., BLDG. 8, BAY 32, 34
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ALEJANDRO GONZALEZ

MGR

08/14/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date