

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000049552

FILED
Jan 18, 2007
Secretary of State

Entity Name: ADVANCED TECHNOLOGY COMPLETE AUTO SERVICE, LLC

Current Principal Place of Business:

15150 WEST DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

15150 WEST DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 20-2878287

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTTO, MARIA
15150 WEST DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

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: SCOTTO, THOMAS
Address: 11400 SW 96TH AVENUE
City-St-Zip: MIAMI, FL 33176

Title: MGRM () Delete
Name: LEON, ORLANDO
Address: 11980 SW 182ND TERRACE
City-St-Zip: MIAMI, FL 33177

Title: MGRM (X) Delete
Name: VALLE, CELESTE C
Address: 1820 HIBISCUS DRIVE
City-St-Zip: N. MIAMI, FL 33181

ADDITIONS/CHANGES:

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

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

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: MARIA SCOTTO

RA

01/18/2007

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