


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 28, 2006 8:00 am
Secretary of State

03-10-2006 90129 040 ****50.00

DOCUMENT # L05000069061

1. Entity Name
RMT AUTOMOTIVE LLC



Principal Place of Business
**8602 TEMPLE TERRACE HIGHWAY
 UNIT 21 & 22
 TEMPLE TERRACE, FL 33637**

Mailing Address
**PO BOX 16374
 TAMPA, FL 33687 US**

30003561



2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
16528 N. Dale Mabry Hwy
 Suite, Apt. #, etc.
 City & State
Tampa, FL
 Zip Country
33618 US

02222006 Chg-LLC CR2E083 (11/05)

4. FEI Number
42-1674211

Applied For
 Not Applicable

5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent
**RADHAY, RALPH
 181129 NASSAU POINT DRIVE
 TAMPA, FL 33647**

7. Name and Address of New Registered Agent
 Name **Walter Sanders**
 Street Address (P.O. Box Number is Not Acceptable)
16528 N. Dale Mabry Hwy
 City **Tampa** FL Zip Code **33618**

I, 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 **Walter Sanders** **Walter Sanders** DATE **2/24/06**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

**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 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
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Handwritten entry in row 10:
 P
 Radhay, Ralph
 181129 NASSAU POINT DRIVE
 Tampa, FL 33647

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: **Ralph Radhay** **Ralph Radhay** DATE **2/24/06**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE



ATTACHMENT

30603561

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 14, 2006

RMT AUTOMOTIVE LLC
16528 N DALE MABRY HWY
TAMPA, FL 33618 US

Subject: RMT AUTOMOTIVE LLC

Reference Number: L05000069061

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by a managing member, manager or an authorized representative of the limited liability company.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850)-245-6051.

/RM
ANNUAL REPORTS SECTION