

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000106538

**FILED**  
**Apr 22, 2008**  
**Secretary of State**

**Entity Name:** DORAL CLASSIC AUTO SALES LLC

**Current Principal Place of Business:**

4458 NW 74 AVE  
DORAL, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

4458 NW 74 AVE  
DORAL, FL 33166

**New Mailing Address:**

4454 NW 74 AVE  
MIAMI, FL 33166

FEI Number: 20-3752541

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CONTIPELLI, BRIAN  
4454 NW 74 AVE  
DORAL, FL 33166 US

**Name and Address of New Registered Agent:**

CONTIPELLI, BRIAN  
11168 NW 80 LANE  
DORAL, FL 33178 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: BRIAN CONTIPELLI

04/22/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P S ( ) Delete  
Name: CONTIPELLI, BRIAN N  
Address: 4454 NW 74 AVE  
City-St-Zip: DORAL, FL 33166

Title: VPT ( ) Delete  
Name: CONTIELLI, ROSELI G  
Address: 4454 NW 74 AVE  
City-St-Zip: DORAL, FL 33166

**ADDITIONS/CHANGES:**

Title: P S (X) Change ( ) Addition  
Name: CONTIPELLI, BRIAN N  
Address: 11168 NW 80 LANE  
City-St-Zip: DORAL, FL 33178

Title: VPT (X) Change ( ) Addition  
Name: CONTIELLI, ROSELI G  
Address: 11168 NW 80 LANE  
City-St-Zip: DORAL, FL 33178

I hereby certify that the information supplied with this filing does not qualify 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: BRIAN CONTIPELLI

P

04/22/2008

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