

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000107134

Entity Name: ROXCAR COMPANY, LLC

FILED  
Apr 28, 2008  
Secretary of State

## Current Principal Place of Business:

2107 JEREMAIH WAY  
KISSIMMEE, FL 34743

## New Principal Place of Business:

1408 BASS SLOUGH CIR.  
1424  
KISSIMMEE, FL 34743

## Current Mailing Address:

P.O.BOX 451416  
KISSIMMEE, FL 34745

## New Mailing Address:

FEI Number: 20-3764392

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ANDRADE, ROXANA  
2107 JEREMAIH WAY  
KISSIMMEE, FL 34743 US

## Name and Address of New Registered Agent:

ANDRADE, ROXANA  
1408 BASS SLOUGH CIR.  
1424  
KISSIMMEE, FL 34743 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:

04/28/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: ANDRADE, ROXANA  
Address: 2107 JEREMIAH WAY  
City-St-Zip: KISSIMMEE, FL 34743

Title: MGR ( ) Delete  
Name: CALDERON, CARLOS  
Address: 3013 CLIPPER COVE LANE, 101  
City-St-Zip: KISSIMMEE, FL 34741

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: ANDRADE, ROXANA  
Address: 1408 BASS SLOUGH CIR. 1424  
City-St-Zip: KISSIMMEE, FL 34743

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

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: ROXANA ANDRADE

MGR

04/28/2008

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