



# 2007 LIMITED LIABILITY COMPANY ANNUAL-REPORT (AR)

**FILED**  
**Mar 16, 2007 8:00 am**  
**Secretary of State**

02-23-2007 90209 006 \*\*\*\*50.00

<b>DOCUMENT # L06000030703</b> 1. Entity Name <b>AA ONSITE FUEL POLISHING, LLC</b>					
Principal Place of Business <b>100 E. LINTON BLVD., SUITE 304A DELRAY BEACH FL 33483</b>			Mailing Address <b>100 E. LINTON BLVD., SUITE 304A DELRAY BEACH FL 33483</b>		
2. Principal Place of Business - No P.O. Box #  			3. Mailing Address  		
Suite, Apt. #, etc.  			Suite, Apt. #, etc.  		
City & State  			City & State  		
Zip  		Country  		4. FEI Number <b>20-4504700</b>	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>ADKINS, ANNIE J ESQUIRE 100 E. LINTON BLVD., SUITE 304A DELRAY BEACH FL 33483</b>				7. Name and Address of New Registered Agent Name  Street Address (P.O. Box Number is Not Acceptable)   City <b>FL</b> Zip Code	
8. 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 _____ (NOTE: Registered Agent signature required when remaining) DATE _____					
<b>FILE NOW!!! FEE IS \$50.00</b> <b>Make Check Payable to Florida Department of State</b> <b>Due By May 1, 2007</b>					
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM JOHN DAVID ROOF 100 E. LINTON BLVD., SUITE 304A DELRAY BEACH FL 33483			<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	 			<input type="checkbox"/> Delete	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	 			<input type="checkbox"/> Delete	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 recorder or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.				SIGNATURE _____	
SIGNATURE (Typed or Printed Name of Signing Managing Member, Manager, or Authorized Representative)				Date _____	

30002670  
#60600030703

 **IRS** DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE  
P.O. BOX 9003  
HOLTSVILLE NY 11742-9003

**XX**

AA ONSITE FUEL POLISHING LLC  
JOHN DAVID ROOF MBR  
100 EAST LINTON BLVD SUITE 304A  
DELRAY BEACH FL 33483

Number of this notice: CP 575 B

For assistance you may call us at:  
1-800-829-4933

IF YOU WRITE, ATTACH THE  
STUB OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 20-4504700. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, please use the label we provided. If this isn't possible, it is very important that you use your EIN and complete name and address exactly as shown above on all federal tax forms, payments and related correspondence. Any variation may cause a delay in processing, result in incorrect information in your account or even cause you to be assigned more than one EIN. If the information isn't correct as shown above, please correct it using tear off stub from this notice and return it to us so we can correct your account.

Based on the information from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1065

04/15/2007

If you have questions about the form(s) or the due dates(s) shown, you can call or write to us at the phone number or address at the top of the first page of this letter. If you need help in determining what your tax year is, see Publication 536, Accounting Periods and Methods, available at your local IRS office or you can download this Publication from our Web site at [www.irs.gov](http://www.irs.gov).

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination on your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue.)