

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000042780

Entity Name: BIG 3 PULL-A-PART, LLC

FILED
Mar 13, 2007
Secretary of State

Current Principal Place of Business:

3595 118TH AVENUE NORTH
CLEARWATER, FL 33762

New Principal Place of Business:

Current Mailing Address:

PO BOX 17244
CLEARWATER, FL 33762

New Mailing Address:

FEI Number: 20-4763625

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RILEY, STEVEN P
4805 WEST LAUREL SUITE 230
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

SMITH, GAYLA W
3595 118TH AVE NORTH
CLEARWATER, FL 33762 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: GAYLA W SMITH

03/13/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SMITH, GAYLA
Address: 8140 S. KIMBERLY CIRCLE
City-St-Zip: FLORAL CITY, FL 34436

Title: MGRM () Delete
Name: SMITH, WESLEY
Address: 16802 WHIRLEY ROAD
City-St-Zip: LUTZ, FL 33558

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGRM () Change (X) Addition
Name: SMITH, RONALD B
Address: 14110 FARMINGTON BLVD
City-St-Zip: TAMPA, FL 33625

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: GAYLA W SMITH

MGRM

03/13/2007

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