

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000066480

Entity Name: ALL VEHICLES SALES LLC

FILED
May 29, 2007
Secretary of State

Current Principal Place of Business:

P O BOX 8090
PORT SAINT LUCIE, FL 34985

New Principal Place of Business:

430 S. DIXIE HWY
HOLLYWOOD, FL 33020

Current Mailing Address:

P O BOX 8090
PORT SAINT LUCIE, FL 34985

New Mailing Address:

P O BOX 1102
NYC, NY 10010

FEI Number: 42-1710581 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

ORKABI, EYAL
13833 NW 19TH AVE
MIAMI, FL 33054 US

Name and Address of New Registered Agent:

ORKABI, EYAL
2058 SW BEARD ST
PORT ST. LUCIE, FL 34953 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:

05/29/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ORKABI, EYAL MEMBER
Address: PO BOX 8090
City-St-Zip: PORT SAINT LUCIE, FL 34985

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

ADDITIONS/CHANGES:

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

Title: MGR () Change (X) Addition
Name: ANTELMAN, ILENE
Address: 20401 NORTH EAST 30TH AVE
City-St-Zip: AVENTURA, FL 33180

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: EYAL ORKABI

MGRM

05/29/2007

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