

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000121611

FILED
Feb 28, 2007
Secretary of State

Entity Name: AUTOBANK FINANCIAL SERVICES, LLC

Current Principal Place of Business:

801 S. UNIVERSITY DRIVE, STE. A-101
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

801 S. UNIVERSITY DRIVE, STE. A-101
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 65-1074581

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AMERICAN INFORMATION SERVICES, INC.
LAS OLAS CENTRE II, STE. 1600
350 EAST LAS OLAS BLVD.
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

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

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

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

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: DOV, SZAPIRO MGRM
Address: 801 S. UNIVERSITY DRIVE, SUITE A101
City-St-Zip: PLANTATION, FL 33324

Title: MGRM () Change (X) Addition
Name: URI, SZAPIRO MGRM
Address: 801 S. UNIVERSITY DRIVE, SUITE A101
City-St-Zip: PLANTATION, FL 33324

Title: MGRM () Change (X) Addition
Name: DAVID, BENMOHA MGRM
Address: 801 S. UNIVERSITY DRIVE, SUITE A101
City-St-Zip: PLANTATION, FL 33324

Title: MGRM () Change (X) Addition
Name: ARIAD, SOMMER MGRM
Address: 801 S. UNIVERSITY DRIVE, SUITE A101
City-St-Zip: PLANTATION, FL 33324

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: DOV SZAPIRO

MGRM

02/28/2007

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