2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# L07000059258

Entity Name: BENJAMIN CHRISTIAN MOBILE AUTO REPAIR, LLC

Current Principal Place of Business:

5601 NW 5TH ST. APT 32D
MIAMI, FL 33126 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 144455
CORAL GABLES, FL 33114 US

New Mailing Address:

FEI Number: 26-0369305 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GROERO, ORESTES
1500 SALZEDO STREET
UNIT B
CORAL GABLES, FL 33134 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: MGRM ( ) Delete
Name: GROERO, ORESTES
Address: 1500 SALZEDO STREET, UNIT B
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGRM ( ) Delete
Name: GROERO, ISAURA D
Address: 1500 SALZEDO STREET, UNIT B
City-St-Zip: CORAL GABLES, FL 33134 US

ADDITIONS/CHANGES:

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

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: ISAURA D. GROERO MGRM 04/30/2008

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