2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000066716

1023 NW 85 TERR

PLANTATION, FL 33322

Address:

City-St-Zip:

Entity Name: JAMCOM AUTOMOTIVE LLC

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2340 SOUTH STATE ROAD 7 MIRAMAR, FL 33023 **Current Mailing Address: New Mailing Address:** 9993 PERIWINKLE ST. MIRAMAR, FL 33025 FEI Number: 26-0501097 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WALKER, NORMAN L 9993 PERIWINKLE ST. US MIRAMAR, FL 33025 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: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete WALKER, NORMAN Name: Name: 9993 PERIKINKLE ST. Address: Address: City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: GOLDSON, ANTHONY Name: Address: 1450 NW 194 ST. Address: City-St-Zip: MIAMI GARDENS, FL 33169 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MARIN, CARLOS Name: Name: Address: 5933 FILMORE ST. Address: City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition ALLEN, MEDRICH Name: Name: 785 NW 185 DRV Address: Address: City-St-Zip: MIAMI, FL 33169 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition TAYLOR, CLIFFORD Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: NORMAN WALKER MGR 04/29/2009