

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000067553

FILED  
Mar 16, 2009  
Secretary of State

Entity Name: GARO AUTO REPAIR, LLC

**Current Principal Place of Business:**

7893 NW 98TH STREET  
HIALEAH GARDENS, FL 33016

**New Principal Place of Business:**

**Current Mailing Address:**

7893 NW 98TH STREET  
HIALEAH GARDENS, FL 33016

**New Mailing Address:**

FEI Number: 26-2081369      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SARI, MOHAMAD  
7893 NW 98TH STREET  
HIALEAH GARDENS, FL 33016      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: SARI, MOHAMAD  
Address: 7893 NW 98TH STREET  
City-St-Zip: HIALEAH GARDENS, FL 33016

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

**ADDITIONS/CHANGES:**

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

Title: MG ( ) Change (X) Addition  
Name: SARI, HALIMEH  
Address: 7893 NW 98TH STREET  
City-St-Zip: HIALEAH, FL 33016

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: MOHAMAD SARI      MGRM      03/16/2009

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