

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000085444

FILED  
Apr 28, 2010  
Secretary of State

**Entity Name:** ELETTRA PACKAGING, LLC

**Current Principal Place of Business:**

201 S. BISCAYNE BLVD., SUITE 1800  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

201 S. BISCAYNE BLVD., SUITE 1800  
MIAMI, FL 33131

**New Mailing Address:**

2520 NW 97 AVE  
120  
MIAMI, FL 33172

FEI Number: 27-0891106

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LIBERATORE, FULVIA  
201 S. BISCAYNE BLVD., SUITE 1800  
MIAMI, FL 33131 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  
Name: LIBERATORE, FULVIA  
Address: 201 S. BISCAYNE BLVD., SUITE 1800  
City-St-Zip: MIAMI, FL 33131

Title: MGR  
Name: LIBERATORE, FLAVIO  
Address: 201 S. BISCAYNE BLVD., SUITE 1800  
City-St-Zip: MIAMI, FL 33131

Title: MGR  
Name: PANTALEONI, ELETTRA  
Address: 201 S. BISCAYNE BLVD., SUITE 1800  
City-St-Zip: MIAMI, FL 33131

Title: MGR  
Name: CASALE, MARY LOU  
Address: 201 S. BISCAYNE BLVD., SUITE 1800  
City-St-Zip: MIAMI, FL 33131

I hereby 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: FLAVIO LIBERATORE

MGR

04/28/2010

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