2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M02000001220

1. Entity Name
INTERNATIONAL CUSHIONING COMPANY LLC

Principal Place of Business	Mailing Address
240 BOUNDARY ROAD MARLBORO, NJ 07746	240 BOUNDARY ROAD MARLBORO, NJ 07746

DO NOT WRITE IN THIS SPACE

07012004 No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
22-3845948	Not Applicable

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by September 8, 2004

U000U0165959
07/13/04-80003-008 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	LEVIATHAN INDUSTRIES CORP.
STREET ADDRESS	240 BOUNDARY ROAD
CITY-ST-ZIP	MARLBORO, NJ 07746
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _Buddy H. Bussey III_   Buddy H. Bussey III   7/7/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #