

2002 **FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 13, 2002 8:00 am**  
**Secretary of State**

05-13-2002 90207 030 \*\*\*\*50.00

DOCUMENT # L99000008391

1. Entity Name

IREMA FLEXIBLE PLASTICS, LLC.

**DO NOT WRITE IN THIS SPACE**

**960956**

2. Principal Place of Business

6701 N.W. 37th Court

Suite, Apt. #, etc.

3. Mailing Address

Post Office Box 2405

Suite, Apt. #, etc.

City & State  
Miami FL

City & State  
Ocala FL

Zip

33147

Country

Zip

34478

Country

4. FEI Number

52-2213761

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
CARRERAS RAUL JR.

Street Address (P.O. Box Number is Not Acceptable)  
101 S.W. Third Street

City  
Ocala

FL

Zip Code  
34474

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reissuing)

DATE

4/29/2001

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
MGRM  
PACHECO, MARCO ANTONIO  
STREET ADDRESS  
6701 N.W. 37th Court  
CITY-ST-ZIP  
Miami FL 33147

TITLE  
NAME  
MGRM  
PINTO, IRENE  
STREET ADDRESS  
6701 N.W. 37th Court  
CITY-ST-ZIP  
Miami FL 33147

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

13. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Raul Carreras, Jr., Attorney in Fact for  
Marco Antonio Pacheco, Managing Member

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/2001

Date

(352) 622-1188

Daytime Phone #

CR2E034B (12/01)