

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000008391

FILED
Sep 07, 2006
Secretary of State

Entity Name: IREMA FLEXIBLE PLASTICS, LLC.

Current Principal Place of Business:

2103 N.W. 79TH AVENUE
MIAMI, FL 33122

New Principal Place of Business:

7933 N.W. 21ST STREET
DORAL, FL 33122

Current Mailing Address:

PO BOX 2405
OCALA, FL 34478

New Mailing Address:

FEI Number: 52-2213761 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CARRERAS, RAUL JR.
101 SW THIRD STREET
OCALA, FL 34474 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: PACHECO, MARCO ANTONIO
Address: 2103 N.W. 79TH AVENUE
City-St-Zip: MIAMI, FL 33122

Title: MGRM () Delete
Name: PINTO, IRENE
Address: 2103 N.W. 79TH AVENUE
City-St-Zip: MIAMI, FL 33122

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PACHECO, MARCO ANTONIO
Address: 7933 N.W. 21ST STREET
City-St-Zip: DORAL, FL 33122

Title: MGRM (X) Change () Addition
Name: PINTO, IRENE
Address: 7933 N.W. 21ST STREET
City-St-Zip: DORAL, FL 33122

I hereby certify that the information supplied with this filing does not qualify for the 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: MARCO PACHECO

MGRM

09/07/2006

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