

2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000000968

Entity Name: ALADDIN TEMP-RITE LLC**Current Principal Place of Business:**250 E MAIN STREET
HENDERSONVILLE, TN 37075**Current Mailing Address:**P.O. BOX 2978
HENDERSONVILLE, TN 37077 29**FEI Number:** 06-1523665**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US*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**Authorized Person(s) Detail :**

Title MGR
Name BERTI, LUCIANO
Address 250 EAST MAIN STREET
City-State-Zip: HENDERSONVILLE TN 37075

Title MGR
Name BURNS, JEFF C
Address 250 E MAIN STREET
City-State-Zip: HENDERSONVILLE TN 37075

Title MGR
Name ROTHSCHILD, MARTIN
Address 250 E MAIN STREET
City-State-Zip: HENDERSONVILLE TN 37075

Title MGR
Name BERTI, FILIPPO
Address 250 E MAIN STREET
City-State-Zip: HENDERSONVILLE TN 37075

Title MANAGER
Name VIGLIONE, ANGELO
Address 250 E MAIN STREET
City-State-Zip: HENDERSONVILLE TN 37075

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JEFF C BURNS**CFO/SECRETARY****05/31/2013**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date