

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2002 8:00 am
Secretary of State

02-27-2002 90088 023 ****50.00

DOCUMENT # L00000011202

1. Entity Name
PRIMAPAC LLC

Principal Place of Business 537 EAST PARK AVENUE TALLAHASSEE FL 32301	Mailing Address 537 EAST PARK AVENUE TALLAHASSEE FL 32301
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **59-3670605** Applied For
 Not Applicable

Zip Country Zip Country 5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**UNDERWOOD, ROBERT L
 537 EAST PARK AVENUE
 TALLAHASSEE FL 32301**

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHUAN CHOOTAN, PHILLIP 537 EAST PARK AVENUE TALLAHASSEE FL 32301 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: *Phillip Chuan* **SIGNATURE REQUIRED** 2002-Feb 15 850-222-2563
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CRZE083 (9/01)