2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 06, 2004
Secretary of State

DOCUMENT# L00000015650

Entity Name: CPG SOLUTIONS, LLC

Current Principal Place of Business:

6400 CONGRESS AVE.
SUITE 1750
BOCA RATON, FL 33487

New Principal Place of Business:

4400 N. FEDERAL HIGHWAY
SUITE 38
BOCA RATON, FL 33431

Current Mailing Address:

6400 CONGRESS AVE.
SUITE 1750
BOCA RATON, FL 33487

New Mailing Address:

4400 N. FEDERAL HIGHWAY
SUITE 38
BOCA RATON, FL 33431

FEI Number: 65-1061771 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GLATER & ASSOCIATES, PA
1560 SAWGRASS CORPORATE PARKWAY
FOURTH FLOOR
SUNRISE, FL 33323 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/MEMBERS:

Title: MGRM ( ) Delete
Name: CRAMER, JAMIE D
Address: 23304 CALIBRE COURT #1307
City-St-Zip: BOCA RATON, FL 33433

Title: MGRM ( ) Delete
Name: SAFADI, ALI Y
Address: 380 SE MIZNER BLVD #1717
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: CRAMER, JAMIE D
Address: 5871 CATESBY STREET
City-St-Zip: BOCA RATON, FL 33433

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALI SAFADI MGRM 01/06/2004

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