

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000001611

FILED
Feb 21, 2008
Secretary of State

Entity Name: EVCO SEALING SYSTEMS, LLC

Current Principal Place of Business:

2165 SUNNYDALE BLVD
SUITE B
CLEARWATER, FL 33765

New Principal Place of Business:

1430 MENDAVIA AVE.
CORAL GABLES, FL 33146 US

Current Mailing Address:

2165 SUNNYDALE BLVD
SUITE B
CLEARWATER, FL 33765

New Mailing Address:

1430 MENDAVIA AVE.
CORAL GABLES, FL 33146 US

FEI Number: 59-3702691

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALDERON, FELIPE L
1430 MENDAVIA AVE.
CORAL GABLES, FL 33146 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: EVCO, SA
Address: LES PETITES ROCHES
City-St-Zip: TREPT, CREMIEU, FR 38460 FR

Title: MGR () Delete
Name: CAMACHO, TIMOTHY
Address: LES PETITES ROCHES
City-St-Zip: TREPT, CREMIEU, FR 38460 FR

Title: MGR () Delete
Name: CALDERON, FELIPE
Address: 1430 MENDAVIA AVE.
City-St-Zip: CORAL GABLES, FL 33146 US

ADDITIONS/CHANGES:

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: FELIPE CALDERON

MGR

02/21/2008

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