


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jun 22, 2007 8:00 am
Secretary of State

05-29-2007 90286 041 ****50.00

DOCUMENT # L03000034777 1. Entity Name ACTICARB TAILORED PRODUCTS, LLC	
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Principal Place of Business 551 NORTH US HIGHWAY 41 DUNNELLON, FL 34432	Mailing Address 551 NORTH US HIGHWAY 41 DUNNELLON, FL 34432
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DO NOT WRITE IN THIS SPACE

05182007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 57-1186338	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
**PATTERSON, BOND & LATWHAW, P.A.
3010 SOUTH THIRD ST.
JACKSONVILLE BECH, FL 32250**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

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

**Filing Fee is \$50.00
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MAZYON, DAVID W J. ROBERT ROGERS 551 N US HWY 41 DUNNELLON, FL 34432
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: **X** *Robert Rogers* * **6/20/07**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #