

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L03000048512

**FILED**  
**Jul 24, 2009**  
**Secretary of State****Entity Name:** IRON CONTAINER, LLC**Current Principal Place of Business:**3230 NW 42 ST.  
MIAMI, FL 33142 US**New Principal Place of Business:****Current Mailing Address:**3230 NW 42 ST.  
MIAMI, FL 33142 US**New Mailing Address:****FEI Number:** 20-1897615**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**IRONS, STEPHANIE L  
2200 S.W. 13 AVENUE  
FORT LAUDERDALE, FL 33315 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:** IRONS, STEPHANIE L  
**Address:** 2200 S.W. 13 AVENUE  
**City-St-Zip:** FORT LAUDERDALE, FL 33315 US**Title:** MGR ( ) Delete  
**Name:** WALTERS, RODNEY C  
**Address:** 16535 NE 26 AVENUE  
**City-St-Zip:** NORTH MIAMI BEACH, FL 33160 US**Title:** MGR ( ) Delete  
**Name:** LEONIFF, JACK F  
**Address:** 10944 SW 37 MANOR  
**City-St-Zip:** DAVIE, FL 33328 US**Title:** MGR ( ) Delete  
**Name:** BISOGNO, GARRETT M  
**Address:** 18181 SW 52 AVENUE  
**City-St-Zip:** SOUTHWEST RANCHES, FL 33331 US**Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****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:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** MGR ( ) Change (X) Addition  
**Name:** IRONS, MICHAEL S CEO  
**Address:** 2200 S.W. 13 AVENUE  
**City-St-Zip:** FORT LAUDERDALE, FL 33315 US

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: STEPHANIE L IRONS

MGRM

07/24/2009

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