

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000008255

FILED
Jun 15, 2007
Secretary of State

Entity Name: INTERNATIONAL CONTAINER REPAIR COMPANY, LLC

Current Principal Place of Business:

1901 ANTARTICA WAY
PORT OF MIAMI
MIAMI, FL 33133

New Principal Place of Business:

1007 NORTH AMERICA WAY, SUITE 407
PORT OF MIAMI
MIAMI, FL 33132

Current Mailing Address:

1901 ANTARTICA WAY
PORT OF MIAMI
MIAMI, FL 33133

New Mailing Address:

1007 NORTH AMERICA WAY, SUITE 407
PORT OF MIAMI
MIAMI, FL 33132

FEI Number: 03-0536065 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SANTIAGO DIEZ, P.A.
80 S.W. 8TH ST, STE 2510
MIAMI, FL 33130 US

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: P () Delete
Name: BENITEZ, ROMAN
Address: 16722 SW 78 CT
City-St-Zip: PALMETTO BAY, FL 33157

Title: MGR (X) Delete
Name: BENITEZ, EDUARDO
Address: 2000 S, BAYSHORE DRIVE
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES:

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: HERBERT R. GOMEZ

CONT

06/15/2007

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