

**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 14, 2005  
Secretary of State**

DOCUMENT# L04000013031

Entity Name: PACIFIC METALLURGICAL LLC

**Current Principal Place of Business:**

781 CRANDON BLVD., SUITE 1503  
KEY BISCAYNE, FL 33149

**New Principal Place of Business:**

**Current Mailing Address:**

781 CRANDON BLVD., SUITE 1503  
KEY BISCAYNE, FL 33149

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GRIFFITHS, EDWARD  
781 CRANDON BLVD., SUITE 1503  
KEY BISCAYNE, FL 33149    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:                      MGR                      ( ) Delete  
Name:                      GRIFFITHS, EDWARD  
Address:                      781 CRANDON BLVD., UNIT 1503  
City-St-Zip:                      KEY BISCAYNE, FL 33149

**ADDITIONS/CHANGES:**

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: EDWARD GRIFFITHS                      MGR                      04/14/2005

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