2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

Jul 14, 2005 8:00 am Secretary of State ____**L0400057258** 07-14-2005 90017 014 ****85.00 1. Entity Name EMS DISTRIBUTION, ENVIRONMENTAL MANUFACTURING SOLUTIONS, L.L.C. Principal Place of Business Mailing Address 7705 PROGRESS CIRCLE 7705 PROGRESS CIRCLE MELBOURNE, FL 32904 MELBOURNE, FL 32904 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07112005 0000000 a a co coanono co a a City & State 4. FEI Number City & State Applied For 20-1476753 Not Applicable Zip Country Country Zio \$5.00 00000000 5. Certificate of Status Desired 00000000000 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MACDONALD, JOHN THOMAS Street Address (P.O. Box Number is Not Acceptable) 7705 PROGRESS CIRCLE MELBOURNE, FL 32904 City Zip Code 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 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 7, 2005 Make check payable to Florida Department of State 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES MGR COLLI (1111) MACDONALD, JOHN THOMAS (TTTTT acmo 7705 PROGRESS CIRCLE arran marana MELBOURNE, FL 32904 ш mnn om e (1) 111 100 100 1111 CONTRACTOR OF THE STATE OF THE (1111) (1111) 00000 DOME ന്മന (mu mnn armo CONTRACTOR OMETERS СШП com co 🔲 општо nmn OFFICER шп [11111] omo arma DECKLESTIM 000010001100 11. I hereby certify that the information supplied with this filing does not qualify 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 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.

Thomas MARDOURLA

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PED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

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