2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# L04000060356

Entity Name: PACK WEST LLC

Current Principal Place of Business:

2263 W. NEW HAVEN AVE.
WEST MELBOURNE, FL 32904

New Principal Place of Business:

Current Mailing Address:

2263 W. NEW HAVEN AVE.
WEST MELBOURNE, FL 32904

New Mailing Address:

FEI Number: 01-0822847 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RODRIGUEZ, ELISABETH A
350 HUNGRY ST., NE
PALM BAY, FL 32907 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: MGR ( ) Delete
Name: BARTREM, RICHARD L
Address: 2263 W. NEW HAVEN AVE
City-St-Zip: WEST MELBOURNE, FL 32904

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: RODRIGUEZ, ELISABETH A
Address: 350 HUNGRY ST. NE
City-St-Zip: PALM BAY, FL 32907

Title: MGRM ( ) Change (X) Addition
Name: RODRIGUEZ, RAMSES J
Address: 350 HUNGRY ST. NE
City-St-Zip: PALM BAY, FL 32907

Title: MGRM ( ) Change (X) Addition
Name: WILDE, NINFA E
Address: 2263 W. NEW HAVEN AVE
City-St-Zip: WEST MELBOURNE, FL 32904

I hereby certify that the information supplied with this filing does not qualify for the 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: ELISABETH A. RODRIGUEZ MGRM 04/27/2006

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