

2005 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000062220

FILED
Jun 03, 2005
Secretary of State

Entity Name: MOLD SPECIALISTS GROUP LLC

Current Principal Place of Business:

331 ILLINOIS AVE.
ST. CLOUD, FL 34769

New Principal Place of Business:

P.O. BOX 701431
ST. CLOUD, FL 34770

Current Mailing Address:

331 ILLINOIS AVE.
ST. CLOUD, FL 34769

New Mailing Address:

P.O. BOX 701431
ST. CLOUD, FL 34770

FEI Number: 83-0408036

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARNES, JULIE A
331 ILLINOIS AVE.
ST. CLOUD, FL 34769 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: BARNES, JULIE A
Address: 331 ILLINOIS AVE.
City-St-Zip: ST. CLOUD, FL 34769

Title: MGR (X) Delete
Name: TORRENTE, SERGIO L
Address: 20905 KINE DRIVE
City-St-Zip: EUSTIS, FL 32736

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 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: JULIE A BARNES

MGR

06/03/2005

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