

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000071191

FILED
Apr 20, 2007
Secretary of State

Entity Name: ALLTECH GROUP PARCEL I, LLC

Current Principal Place of Business:

480 SOUTH CYPRESS ROAD
POMPANO BEACH, FL 33060

New Principal Place of Business:

Current Mailing Address:

2610 PALM AIRE DR N
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 20-1745746

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

USMAN, GHULAM H
480 SOUTH CYPRESS ROAD
POMPANO BEACH, FL 33060 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: MGRM () Delete
Name: USMAN, GHULAM H
Address: 480 S. CYPRESS ROAD
City-St-Zip: POMPANO BEACH, FL 33060

Title: MGRM () Delete
Name: BAMMAN, FRED C III
Address: 2189 SE 9TH STREET
City-St-Zip: POMPANO BEACH, FL 33062

Title: MGRM () Delete
Name: DIGIORGIO, THOMAS H JR
Address: 24 NE 24TH AVE
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: BAMMAN, FRED C III
Address: 2610 PALM AIRE DRIVE NORTH
City-St-Zip: POMPANO BEACH, FL 33069

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 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: FRED C. BAMMAN

MGRM

04/20/2007

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