

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000089019

Entity Name: SIMPLASTICS, LLC

**FILED**  
**Jan 14, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

1270 NW 165 STREET  
200  
MIAMI GARDENS, FL 33169

**New Principal Place of Business:**

**Current Mailing Address:**

POBOX 546948  
MIAMI BEACH, FL 331546948

**New Mailing Address:**

FEI Number: 81-0659669

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COLLINS, RON  
1270 NW 165 STREET  
200  
MIAMI GARDENS, FL 33169 US

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

COLLINS, RITA  
1270 NW 165 STREET  
200  
MIAMI GARDENS, FL 33169 US

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: RC

01/14/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: COLLINS, RITA  
Address: 1270 NW 165 STREET 200  
City-St-Zip: MIAMI GARDENS, FL 33169

**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 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: RCOLLINS

MGRM

01/14/2009

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