

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000017437

FILED  
Jan 20, 2006  
Secretary of State

Entity Name: PLASTIFLEX, LLC

## Current Principal Place of Business:

536 BILTMORE WAY  
CORAL GABLES, FL 33134

## New Principal Place of Business:

1572 NW 165TH ST  
MIAMI, FL 33169

## Current Mailing Address:

536 BILTMORE WAY  
CORAL GABLES, FL 33134

## New Mailing Address:

1572 NW 165TH ST  
MIAMI, FL 33169

FEI Number: 20-2408295

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ORTIZ, ROBERTO J  
536 BILTMORE WAY  
CUEVAS & ORTIZ, P.A.  
CORAL GABLES, FL 33134 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: P ( ) Delete  
Name: MARTI, JAIME T  
Address: 536 BILTMORE WAY  
City-St-Zip: CORAL GABLES, FL 33134

Title: V ( ) Delete  
Name: MARTI DE SALGUERO, MARIA A  
Address: 536 BILTMORE WAY  
City-St-Zip: CORAL GABLES, FL 33134

Title: S ( ) Delete  
Name: MARTI, JORGE  
Address: 536 BILTMORE WAY  
City-St-Zip: CORAL GABLES, FL 33134

Title: T ( ) Delete  
Name: SALGUERO, ANTONIO  
Address: 536 BILTMORE WAY  
City-St-Zip: CORAL GABLES, FL 33134

## ADDITIONS/CHANGES:

Title: P (X) Change ( ) Addition  
Name: MARTI, JAIME T  
Address: 1572 NW 165TH ST  
City-St-Zip: MIAMI, FL 33169

Title: V (X) Change ( ) Addition  
Name: MARTI DE SALGUERO, MARIA A  
Address: 1572 NW 165TH ST  
City-St-Zip: MIAMI, FL 33169

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

Title: T (X) Change ( ) Addition  
Name: SALGUERO, ANTONIO  
Address: 1572 NW 165TH ST  
City-St-Zip: MIAMI, FL 33169

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: FERNANDO DE ROA

MGMR

01/20/2006

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