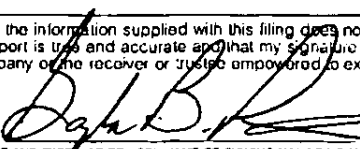


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
May 03, 2007 8:00 am
Secretary of State

04-18-2007 90029 008 ****50.00

4/1

DOCUMENT # L05000019522 1. Entity Name AZTEC PLASTICS, L.L.C.					
Principal Place of Business 1954 U.S. HIGHWAY 41 LAKE CITY FL 32055			Mailing Address POST OFFICE BOX 3576 LAKE CITY FL 32056 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 20-2403331 APPLIED FOR	
Zip Country		Zip Country		5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent ROBERTS, GAYLON B 1954 U.S. HIGHWAY 41 LAKE CITY FL 32055				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when re-issuing) DATE _____					
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007					
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ROBERTS, GAYLON B 1954 U. S. HIGHWAY 41 LAKE CITY FL 32055	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 606, Florida Statutes.					
SIGNATURE: 			Gaylon B. Roberts		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date 4/10/07		
			386-755-3282		