

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000073721

FILED
Apr 26, 2006
Secretary of State

Entity Name: TECHPLASTIC INTERNATIONAL LLC

Current Principal Place of Business:

PARACITO DE SANTO DOMINGO DE HEREDIA
FRENTE A SODA BAR LAS ESTERAS
SAN JOSE, COSTA RICA, CR

New Principal Place of Business:

PARACITO DE SANTO DOMINGO DE HEREDIA
FRENTE A SODA BAR LAS ESTERAS
SAN JOSE, COSTA RICA, CR 000000000 CR

Current Mailing Address:

C/O COMPANY EXPRESS, 6 BEACON ST
STE 725
BOSTON, MA 021083810 US

New Mailing Address:

FEI Number: 98-0465321 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

COMPANY EXPRESS (DELAWARE) LIMITED, INC.
1195 LYNRIDGE LN NE
PALM BAY, FL 329072254 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: MGR () Delete
Name: TORCAL, JOAN
Address: C/O PARACITO DE SANTO DOMINGO DE HEREDIA
City-St-Zip: SAN JOSE, COSTA RICA, CR 000000000 CR

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: TECHPLASTIC INTERNAT, IONAL SA
Address: PARACITO DE SANTO DOMINGO DE HEREDIA FRENT
City-St-Zip: SAN JOSE, COSTA RICA, CR 000000000 CR

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: TECHPLASTIC INTERNATIONAL SA MGR 04/26/2006

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