

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000036601

FILED
Apr 28, 2009
Secretary of State

Entity Name: ALL ALUMINUM CONCEPTS, LLC

Current Principal Place of Business:

4549 ST. AUGUSTINE RD.
SUITE 21
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

4549 ST. AUGUSTINE RD.
SUITE 21
JACKSONVILLE, FL 32207

New Mailing Address:

4549 ST. AUGUSTINE RD.
SUITE 21
JACKSONVILLE, FL 32207

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIAI, ADAM
4549 ST. AUGUSTINE RD.
SUITE 21
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

TRIAI, ADAM C OWNER
4549 ST. AUGUSTINE RD.
SUITE 21
JACKSONVILLE, FL 32207 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: ADAM TRIAI

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TRIAI, ADAM
Address: 4549 ST. AUGUSTINE RD. #21
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TRIAI, ADAM C OWNER
Address: 4549 ST. AUGUSTINE RD. #21
City-St-Zip: JACKSONVILLE, FL 32207

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: ADAM TRIAI

MGRM

04/28/2009

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