

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000052131

FILED  
Apr 15, 2008  
Secretary of State

**Entity Name:** LOGISTICS SOLUTIONS MANUFACTURING COMPANY

**Current Principal Place of Business:**

1665 LEXINGTON AVE  
SUITE #102  
DELAND, FL 32724

**New Principal Place of Business:**

**Current Mailing Address:**

200 W FLORENCE AVE  
DELAND, FL 32720

**New Mailing Address:**

**FEI Number:** 20-4904651

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DELLEGRAZIE-PERREN, REBECA P  
200 W FLORENCE AVE  
DELAND, FL 32720 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: DELLEGRAZIE-PERREN, JUAN C  
Address: 200 W FLORENCE AVE  
City-St-Zip: DELAND, FL 32720

Title: MGR ( ) Delete  
Name: CAMARANO, MARCELO P  
Address: 1665 LEXINGTON AVE SUITE 101  
City-St-Zip: DELAND, FL 32724

**ADDITIONS/CHANGES:**

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

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:** JUAN C DELLEGRAZIE-PERREN

MGR

04/15/2008

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