

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000069688

FILED
Apr 22, 2009
Secretary of State

Entity Name: FILTRATION TECHNOLOGIES, LLC

Current Principal Place of Business:

16051 LA COSTA DRIVE
WESTON, FL 33326

New Principal Place of Business:

1150 FAIRFIELD MEADOWS DR
WESTON, FL 33327

Current Mailing Address:

16051 LA COSTA DRIVE
WESTON, FL 33326

New Mailing Address:

2350 W 84TH ST.
SUITE # 18
HIALEAH, FL 33016

FEI Number: 20-5212523

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CIESLAK, STEPHEN J
16051 LA COSTA DRIVE
WESTON, FL 33326 US

Name and Address of New Registered Agent:

CIESLAK, STEPHEN J
1150 FAIRFIELD MEADOWS DR
WESTON, FL 33327 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:

04/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CIESLAK, STEPHEN J
Address: 16051 LA COSTA DRIVE
City-St-Zip: WESTON, FL 33326

Title: MGRM () Delete
Name: MORENO, OSCAR
Address: 16051 LA COSTA DRIVE
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CIESLAK, STEPHEN J
Address: 1150 FAIRFIELD MEADOWS DR
City-St-Zip: WESTON, FL 33327

Title: MGRM (X) Change () Addition
Name: MORENO, OSCAR
Address: 2691 S.W. 195TH TERRACE
City-St-Zip: MIRAMAR, FL 33029 24

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: STEPHEN J CIESLAK

MGR

04/22/2009

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