

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000101067

FILED
Mar 21, 2007
Secretary of State

Entity Name: ALU PROTEC LLC

Current Principal Place of Business:

2566 NE 206 TER
MIAMI, FL 33180

New Principal Place of Business:

3000 NW 25 AVE
SUITE 16
POMPANO BEACH, FL 33069

Current Mailing Address:

2566 NE 206 TER
MIAMI, FL 33180

New Mailing Address:

FEI Number: 20-5838399

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANCRI, FREDERIC B MR
2566 NE 206 TER
MIAMI, FL 33180 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: TORJMAN, ISAAC MR
Address: 2566 NE 206 TER
City-St-Zip: MIAMI, FL 33180

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: PDT (X) Change () Addition
Name: MAX, MORDCHI MR
Address: 3000 NW 25 AVE, SUITE 16
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: MGR () Change (X) Addition
Name: LANCRI, FREDERIC B MR
Address: 3000 NW 25 AVE, SUITE16
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: VPT () Change (X) Addition
Name: TORDJMAN, ISAAC MR
Address: 3000 NW 25 AVE, SUITE 16
City-St-Zip: POMPANO BEACH, FL 33069 US

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: MORDCHI MAX

PDT

03/21/2007

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