2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# L07000054925

Entity Name: ALL STAR SCANNING & SHREDDING LLC

Current Principal Place of Business:

8900 SW 117 AVENUE
SUITE B-104
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

8900 SW 117 AVENUE
SUITE B-104
MIAMI, FL 33186

New Mailing Address:

FEI Number: 26-0231126 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORDOVA, DIEGO E SR.
8905 SW 87TH AVENUE
#200
MIAMI, FL 33176 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: CORCES, VIRGILIA
Address: 8900 SW 117 AVENUE #B-104
City-St-Zip: MIAMI, FL 33186

Title: MGR ( ) Delete
Name: VASQUEZ, ROSA A
Address: 8900 SW 117 AVENUE #B-104
City-St-Zip: MIAMI, FL 33186

Title: MGR ( ) Delete
Name: AGUILAR, FRANK
Address: 8900 SW 117 AVENUE #B-104
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES:

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

Title: MGR (X) Change ( ) Addition
Name: VAZQUEZ, ROSA A
Address: 8900 SW 117 AVENUE #B-104
City-St-Zip: MIAMI, FL 33186

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: VIRGILIA M. CORCES P 01/16/2009

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