

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000011681

**FILED**  
**Apr 30, 2009**  
**Secretary of State**

**Entity Name:** LAPTONYTE INDUSTRIES LLC

**Current Principal Place of Business:**

380 NE 67TH STREET  
MIAMI, FL 33138

**New Principal Place of Business:**

**Current Mailing Address:**

380 NE 67TH STREET  
MIAMI, FL 33138

**New Mailing Address:**

% GEOFFREY M WAYNE, P.A.  
2929 SW THIRD AVE SUITE 330  
MIAMI, FL 331292710 US

**FEI Number:** 80-0161712

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WAYNE, GEOFFREY M ESQ  
1201 BRICKELL AVE  
MIAMI, FL 331313207 US

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

WAYNE, GEOFFREY M ESQ  
2929 SW THIRD AVE SUITE 330  
MIAMI, FL 331292710 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:

04/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

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

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

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

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: DOURA, RENAUD P  
Address: 380 NE 67TH ST  
City-St-Zip: MIAMI, FL 33138 US

Title: MGRM ( ) Change (X) Addition  
Name: GONZALEZ, PEDRO F VP  
Address: 7204 19TH AVENUE NORTHWEST  
City-St-Zip: BRADENTON, FL 34209 US

Title: MGRM ( ) Change (X) Addition  
Name: DEL MONTE, LETICIA S  
Address: 7204 19TH AVENUE NORTHWEST  
City-St-Zip: BRADENTON, FL 34209 US

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: RENAUD DOURA

MGRM

04/30/2009

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