

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000116654

**Entity Name:** LEXINGTON PLASTIC CARD, LLC

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

9035 EQUUS CIR.  
BOYNTON BEACH, FL 33472

**New Principal Place of Business:**

9 LAKE VISTA WAY  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

9035 EQUUS CIR.  
BOYNTON BEACH, FL 33472

**New Mailing Address:**

9 LAKE VISTA WAY  
ORMOND BEACH, FL 32174

**FEI Number:** 26-3925906

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VIVIANI, VITO  
9035 EQUUS CIR.  
BOYNTON BEACH, FL 33472 US

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

VIVIANI, VITO  
9 LAKE VISTA WAY  
ORMOND BEACH, FL 32174 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: VITO VIVIANI

04/29/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: VIVIANI, VITO  
Address: 9 LAKE VISTA WAY  
City-St-Zip: ORMOND BEACH, FL 32174

I hereby 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: VITO VIVIANI

MGR

04/29/2011

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