

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000124911

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** PACKAGING TECHNOLOGIES OF AMERICA, LLC

**Current Principal Place of Business:**

8009 N.W. 36TH STREET  
DORAL, FL 33166

**New Principal Place of Business:**

8009 N.W. 36TH STREET  
SUITE #230  
DORAL, FL 33166

**Current Mailing Address:**

8009 N.W. 36TH STREET  
DORAL, FL 33166

**New Mailing Address:**

8009 N.W. 36TH STREET  
SUITE #230  
DORAL, FL 33166

**FEI Number:** 27-4218471

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DAVID ESTRELLA, P.A.  
55 MERRICK WAY, SUITE 210  
CORAL GABLES, FL 33134 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: MGRM  
Name: CASTILLO TORRES, MARCOS JOSE  
Address: 8009 N.W. 36TH STREET, SUITE #230  
City-St-Zip: DORAL, FL 33166

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: MARCOS JOSE CASTILLO TORRES

MGRM

03/15/2011

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