## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## May 19, 2004 8:00 am Secretary of State 05-05-2004 90010 029 \*\*\*\*50 00 **DOCUMENT # L99000000280** 1. Entity Name PPCT PRODUCTS LLC Principal Place of Business Mailing Address 34006736 7635 WEST 28TH AVENUE 7635 WEST 28TH AVENUE HIALEAH, FL 33106 HIALEAH, FL 33106 04292004 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 65-0888611 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent FRIEDMAN, ROSENWASSER & GOLDBAUM, P.A. DO NOT WRITE -5355 TOWN CENTER RD, SUITE 801 BOCA RATON, FL 33486 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. ... Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2004 9. MANAGING MEMBERS/MANAGERS TITLE ROTMIL, JOSEPH A STREET ADDRESS 7635 WEST 28TH AVENUE CITY-ST-ZIP-HIALEAH, FL 33106 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

11. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a managing member or manager of the imited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE AND TYPED O

STREET ADORESS

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**FILED**