


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Aug 01, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # M01000001085  
 1. Entity Name  
 CAROTAM CONTAINER, LLC



Principal Place of Business 3801A BEAM ROAD SUITE A CHARLOTTE, NC 28217	Mailing Address 3801A BEAM ROAD SUITE A CHARLOTTE, NC 28217
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07162007 No Chg-LLC CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 56-2251592	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
 PERRY, ARTHUR JR.  
 2375 GUY N. VERGER BLVD.  
 TAMPA, FL 33605

**DO NOT WRITE 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: \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE: \_\_\_\_\_

**Filing Fee is \$50.00**  
**Due by September 14, 2007**

U00000771165  
 08/01/07-80008-010 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KOCAN, JASON C 55 WARREN STREET CHARLESTON, SC 29403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PERRY, ARTHUR 16 DAVIS BLVD APT P TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KOCAN, DAVID 3517 BRENTWOOD DR GASTONIA, NC 28056
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 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: David J. Kocan Aug. 1, 2007 704-423-9300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #