2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # M04000002383

1. Entity Name

DUPONT FILAMENTS-AMERICAS, LLC



Principal Place of Business

C/O WASHINGTON WORKS 8480 DUPONT ROAD WASHINGTON, WV 26181 Mailing Address 1007 MARKET ST

D 13039 WILMINGTON, DE 19898

Barrell Control of the Control of th

FILED Mar 29, 2007 8:00 am Secretary of State

03-29-2007 90179 013 ****50.00

00030330



03132007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 10-1166691

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

SIGNATURE: X

.: ;

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_	Signature, typed or printed name of registered agent and title if applicable.	NOTE: Registered Agent signature required when reinstating	p) DATE
Filing Fee is \$50.00 Due by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LEUNG, DANIEL W 28/F TWR 6,GATEWAY,9 CANTON RD,TSIMSHATSU KOWLOON, HONG KONG,		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SMITH, KEITH J 1007 MARKET ST., D13039 WILMINGTON, DE 19898		
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGR ZHONG, YIN XIN YUQI TOWN(WEST), XISHAN COUNTY,WUXI CITY JIANGSU PROVINCE,214183,PRC,	D	O NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		in the second se	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		·
11. I hereby certify that the information supplied with this filling 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 acquirate 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.			