

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000001393

Entity Name: LRM INDUSTRIES, LLC

FILED
Apr 18, 2007
Secretary of State

Current Principal Place of Business:

135 GUS HIPPI BLVD
ROCKLEDGE, FL 32955

New Principal Place of Business:

Current Mailing Address:

135 GUS HIPPI BLVD
ROCKLEDGE, FL 32955

New Mailing Address:

FEI Number: 20-2267069

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEST, PERRY D.ESQ
215 S. RIVERSIDE DR, STE 12
COCOA, FL 32922 US

Name and Address of New Registered Agent:

MORRIS, SALLY A
135 GUS HIPPI BLVD
ROCKLEDGE, FL 32955 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: SALLY MORRIS

04/18/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ENVIROKARE COMPOSITE, CORPORATION
Address: 5850 T.G. LEE BLVD, STE 535
City-St-Zip: ORLANDO, FL 32822

Title: MGR () Delete
Name: NOVA CHEMICALS, INC.,
Address: 1550 CORAOPOLIS HEIGHTS RD
City-St-Zip: MOON TOWNSHIP, PA 15108

Title: MGR () Delete
Name: MORRIS, SALLY A
Address: 135 GUS HIPPI BLVD
City-St-Zip: ROCKLEDGE, FL 32955

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CEO () Change (X) Addition
Name: VERBICKY, JOHN
Address: 135 GUS HIPPI BLVD
City-St-Zip: ROCKLEDGE, FL 32955 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: SALLY MORRIS

MGR

04/18/2007

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