

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 25, 2007 08:00 AM
Secretary of State

DOCUMENT # M06000007104

1. Entity Name
MOBILE ICE PRODUCTS AND SERVICES LLC



Principal Place of Business
% RIFENBURG CONSTRUCTION INC.
159 BRICK CHURCH ROAD
TROY, NY 12180

Mailing Address
% RIFENBURG CONSTRUCTION INC.
159 BRICK CHURCH ROAD
TROY, NY 12180



04172007 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-5334661	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

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

**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 reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$50.00
Due by May 1, 2007**

U00000729293
05/08/07-80034-011 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RIFENBURG, GEORGE A 159 BRICK CHURCH ROAD TROY, NY 12180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RIFENBURG, JOHN K 159 BRICK CHURCH ROAD TROY, NY 12180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RIFENBURG, DAVID K 303 HIGHWAY 70 BYPASS DURHAM, NC 27703
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: *George Rifenburg*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/19/07
Date Daytime Phone #