


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 16, 2006 08:00 AM
Secretary of State

DOCUMENT # L98000000060 1. Entity Name ALLSTEEL & GYPSUM OF PALM BEACH, LLC	
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Principal Place of Business 2280 AVENUE I WEST PALM BEACH, FL 33404	Mailing Address 1250 NE 23RD AVE FORT LAUDERDALE, FL 33311
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U00000469747
03/27/06-80012-007 50.00



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02012006 No Chg-LLC CR2E083 (11/05)

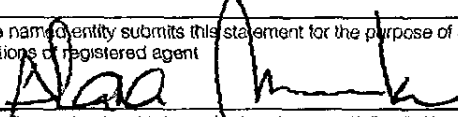
4. FEI Number 65-0805636	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ROBINSON, LISA
VALDINI & PALMER, P.A.
5353 N FEDERAL HWY, SUITE 303
FORT LAUDERDALE, FL 33308

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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:  DATE: **02-02-06**


Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$50.00
Due by May 1, 2006

8. MANAGING MEMBERS/MANAGERS	
TITLE	MBR
NAME	MARKUS, GLENN
STREET ADDRESS	1250 N.W. 23RD AVENUE
CITY-ST-ZIP	FORT LAUDERDALE, FL
TITLE	MGRM
NAME	GADA MANAGEMENT, L.C.
STREET ADDRESS	2300 BARCELONA DRIVE
CITY-ST-ZIP	FT. LAUDERDALE, FL 33301
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  **ALANA MARKUS** DATE: **02.03.06** Ongoing Phone #: **954.587.19**

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