

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000000060

**FILED**  
**Feb 03, 2009**  
**Secretary of State**

**Entity Name:** ALLSTEEL & GYPSUM OF PALM BEACH, LLC

**Current Principal Place of Business:**

2280 AVENUE L  
WEST PALM BEACH, FL 33404

**New Principal Place of Business:**

**Current Mailing Address:**

1250 NE 23RD AVE  
FORT LAUDERDALE, FL 33311

**New Mailing Address:**

FEI Number: 65-0805636

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

PALMER, ANTHONY  
PALMER LUGO & OLEA  
5353 N FEDERAL HWY, SUITE 207  
FORT LAUDERDALE, FL 33308 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: ANTHONY PALMER

02/03/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MARKUS, GLENN  
Address: 1250 N.W. 23RD AVENUE  
City-St-Zip: FORT LAUDERDALE, FL

Title: MGRM ( ) Delete  
Name: GADA MANAGEMENT, L.C., .  
Address: 2300 BARCELONA DRIVE  
City-St-Zip: FT.LAUDERDALE, FL 33301

**ADDITIONS/CHANGES:**

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

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

I hereby certify that the information supplied with this filing does not qualify 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: GLENN MARKUS

MGRM

02/03/2009

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