2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 21, 2008
Secretary of State

DOCUMENT# L02000000777

Entity Name: DEFCO ASSET MANAGEMENT LC

Current Principal Place of Business:

BOX 7853, SAIF ZONE, EXECUTIVE SUITE Y2
AJMAN
14 936 UNITED ARAB EMIRATES, XX

New Principal Place of Business:

BOX 7853, SAIF ZONE, EXECUTIVE SUITE Y2
AJMAN
14 936 UNITED ARAB EMIRATES, XX 00000 XX

Current Mailing Address:

1220 NORTH MARKET STREET, SUITE 804
WILMINGTON, DE 19801

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

FLORIDA FILING & SEARCH SERVICES, INC.
155 OFFICE PLAZA DRIVES, SUITE A
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: DWEN, MICHAEL
Address: BOX 7853, SAIF ZONE, EXECUTIVE SUITE Y2
City-St-Zip: 14 936 AJMAN, UAE, XX

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: DWEN, MICHAEL
Address: BOX 7853, SAIF ZONE, EXECUTIVE SUITE Y2
City-St-Zip: 14 936 AJMAN, UAE, XX 000000 XX

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: JANET M. CARUCCIO, ON BEHALF OF MANAGER MGRM 05/21/2008

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