2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # L02000030102

1. Entity Name G & G PROJECT MANAGERS, L.L.C



FILED Apr 28, 2008 08:00 AN Secretary of State

Principal Place of Business

4863 SW 147 PLACE MIAMI, FL 33185

Mailing Address

4863 SW 147 PLACE

MIAMI, FL 33185



04242008 No Chg-LLC DO NOT WRITE IN THIS SPACE

CR2E083 (12/07)

4. FE! Number 51-0443735 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GYORY, JANOS 4863 SW 147 PLACE MIAMI, FL 33185

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.	am familiar with, and accept
the obligations of registered agent.	

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent algreture required when reinstating)

FILE NOW!!! FEE 18 \$138.75 After May 1, 2008 Fee will be \$538.75

U00000930646 05/21/08-80116-024 138.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	GYORY, ISTVAN
STREET ADDRESS	4863 SW 147 PLACE
CITY-ST-ZIP	MIAMI, FL 33185
TITLE	MGR
NAME	GYORY, JANOS
STREET ADDRESS	4863 SW 147 PLACE
CITY-ST-ZIP	MIAMI, FL 33185
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-SY-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	

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.

CITY-ST-ZIP

MEMBER, OR AUTHORIZED REPRESENTATIVE

4/24/08