2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Dec 21, 2006
Secretary of State

DOCUMENT# L05000054007

Entity Name: GALLEON ENTERPRISES LLC

Current Principal Place of Business:	**New Principal Place of Business:**
6803 STAFFORD RD PLANT CITY, FL 33565	6903 STAFFORD RD PLANT CITY, FL 33565

Current Mailing Address:	**New Mailing Address:**
6803 STAFFORD RD PLANT CITY, FL 33565	6903 STAFFORD RD PLANT CITY, FL 33565

FEI Number: 42-1669597 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **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:	**Name and Address of New Registered Agent:**
HUSTER, H.L. 6803 STAFFORD RD PLANT CITY, FL 33565 US	HUSTER, H.L. 6903 STAFFORD RD PLANT CITY, FL 33565 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: H L HUSTER 12/21/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:		**ADDITIONS/CHANGES:**	
Title:	MGRM ( ) Delete	Title:	MGRM (X) Change ( ) Addition
Name:	HUSTER, H.L.	Name:	HUSTER, H.L.
Address:	6803 STAFFORD RD	Address:	6903 STAFFORD RD
City-St-Zip:	PLANT CITY, FL 33565	City-St-Zip:	PLANT CITY, FL 33565

I hereby certify that the information supplied with this filing does not qualify for the 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: H L HUSTER MGRM 12/21/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date