2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 01, 2006
Secretary of State

DOCUMENT# L05000057322

Entity Name: GSL, LLC

Current Principal Place of Business:

2681 W 81 STREET
HIALEAH, FL 33016

New Principal Place of Business:

Current Mailing Address:

2681 W 81 STREET
HIALEAH, FL 33016

New Mailing Address:

FEI Number: 68-0608442 **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:

VACCARELLA, VINCENT F ESQ.
18851 NE 29 AVENUE
SUITE 304
AVENTURA, FL 33180 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: PRES ( ) Delete
Name: LEVINE, SHEILA
Address: 7080 SW 79 TERRACE
City-St-Zip: MIAMI, FL 33143 US

Title: VP ( ) Delete
Name: LEVINE, GREGORY
Address: 7080 SW 79 TERRACE
City-St-Zip: MIAMI, FL 33143 US

Title: SEC ( ) Delete
Name: LEVINE, HOWARD
Address: 7080 SW 79 TERRACE
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES:

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

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 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: GREGORY S LEVINE VP 08/01/2006

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