

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000060191

FILED
Jan 21, 2008
Secretary of State

Entity Name: LEGACY ROOFING OF FL/ AHEAD GENERAL CONTRACTORS & RESTORATION LLC

Current Principal Place of Business:

3907 N. FEDERAL HW #195
POMPANO BEACH, FL 33064

New Principal Place of Business:

Current Mailing Address:

3907 N. FEDERAL HW #195
POMPANO BEACH, FL 33064

New Mailing Address:

FEI Number: 43-2085396

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE JESUS, RAQUEL
1428 OLIVE TREE CIR
W PALM BEACH, FL 33413 US

Name and Address of New Registered Agent:

DE JESUS, RAQUEL
4330 NE 15TH TERRACE
POMPANO BEACH, FL 33064 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: RAQUEL DE JESUS

01/21/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ALMEIDA NETO, URBANO
Address: 1428 OLIVE TREE CIR
City-St-Zip: W PALM BEACH, FL 33413

Title: MGRM () Delete
Name: DE JESUS, RAQUEL
Address: 1428 OLIVE TREE CIR
City-St-Zip: W PALM BEACH, FL 33413

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ALMEIDA NETO, URBANO
Address: 4330 NE 15TH TERRACE
City-St-Zip: POMPANO BEACH, FL 33064

Title: MGRM (X) Change () Addition
Name: DE JESUS, RAQUEL
Address: 4330 NE 15TH TERRACE
City-St-Zip: POMPANO BEACH, FL 33064

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: URBANO NETO

MGR

01/21/2008

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