

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000016351

Entity Name: GALLEON CONTRACTING, L.L.C.

FILED
Oct 30, 2008
Secretary of State

Current Principal Place of Business:

GALLEON INVESTMENTS OF SOUTH FLORIDA LLC
1513 SE 7TH STREET
DEERFIELD BEACH, FL 33441

Current Mailing Address:

GALLEON INVESTMENTS OF SOUTH FLORIDA LLC
1513 SE 7TH STREET
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

GALLEON CONTRACTING, L.L.C.
1235 S.E. 12TH AVENUE
DEERFIELD BEACH, FL 33441

New Mailing Address:

GALLEON CONTRACTING, L.L.C.
1235 S.E. 12TH AVENUE
DEERFIELD BEACH, FL 33441

FEI Number: 03-0588813

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, VERGIL J SR
1513 SE 7TH STREET
DEERFIELD BEACH, FL 33441 US

Name and Address of New Registered Agent:

SMITH, VERGIL J SR
1235 S.E. 12TH AVENUE
DEERFIELD BEACH, FL 33441 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: VERGIL J. SMITH SR

10/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SMITH, VERGIL J SR.
Address: 1513 SE 7TH STREET
City-St-Zip: DEERFIELD BEACH, FL 33441

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KRAVECZ, ERICA
Address: 1235 S.E. 12TH AVENUE
City-St-Zip: DEERFIELD BEACH, FL 33441

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: ERICA KRAVECZ

MGRM

10/30/2008

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