

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000034048

FILED
May 01, 2008
Secretary of State

Entity Name: GLOBAL CONTRACTORS LLC

Current Principal Place of Business:

541 14TH STREET SE
NAPLES, FL 34117 US

New Principal Place of Business:

Current Mailing Address:

541 14TH STREET SE
NAPLES, FL 34117 US

New Mailing Address:

FEI Number: 20-4616600 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:

GONZALEZ, DANIEL
541 14TH STREET SE
NAPLES, FL 34117 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GONZALEZ, DANIEL
Address: 541 14TH STREET SE
City-St-Zip: NAPLES, FL 34117 US

Title: MGR () Delete
Name: VELASCO, KAREN
Address: 7591 BRISTOL CIR
City-St-Zip: NAPLES, FL 34120 US

Title: MGR () Delete
Name: LEMA, BRUNO
Address: 4880 CORAL WOOD DR
City-St-Zip: NAPLES, FL 34119

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 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: DANIEL GONZALEZ

MGR

05/01/2008

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