

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000039249

Entity Name: GFB CONSTRUCTION LLC

FILED
Mar 29, 2009
Secretary of State

Current Principal Place of Business:

1901 HARRISON ST
SUITE 7
HOLLYWOOD, FL 33020

New Principal Place of Business:

160 SW 6TH COURT
POMPANO BEACH, FL 33060

Current Mailing Address:

1901 HARRISON ST
SUITE 7
HOLLYWOOD, FL 33020

New Mailing Address:

160 SW 6TH COURT
POMPANO BEACH, FL 33060

FEI Number: 20-4706376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELEN, GASTON F
160 SW 6 CT
POMPANO BEACH, FL 33060 US

Name and Address of New Registered Agent:

BELEN, GASTON F
160 SW 6TH COURT
POMPANO BEACH, FL 33060 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: GASTON BELEN

03/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BELEN, GASTON F
Address: 4301 SW 160 AVE APT 103
City-St-Zip: MIRAMAR, FL 33027

Title: MGRM () Delete
Name: SUJOY, VICTORIA
Address: 4301 SW 160 AVE APT 103
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BELEN, GASTON F
Address: 160 SW 6TH COURT
City-St-Zip: POMPANO BEACH, FL 33060

Title: MGRM (X) Change () Addition
Name: SUJOY, VICTORIA
Address: 160 SW 6TH COURT
City-St-Zip: POMPANO BEACH, FL 33060

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: GASTON BELEN

MGRM

03/29/2009

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