2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 11, 2008
Secretary of State

DOCUMENT# L06000055251

Entity Name: GOLDSHIELD HOLDINGS, LLC

Current Principal Place of Business:

1501 NORTHPOINT PARKWAY, SUITE 100
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

1501 NORTHPOINT PARKWAY, SUITE 100
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BILL HUDSON
1501 NORTHPOINT PARKWAY, SUITE 100
WEST PALM BEACH, FL 33407 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: MGRM ( ) Delete
Name: HUDSON, WILLIAM
Address: 1501 NORTHPOINT PARKWAY, SUITE 100
City-St-Zip: WEST PALM BEACH, FL 33407

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGR ( ) Change (X) Addition
Name: PATEL, RAKESH
Address: 1501 NORTHPOINT PARKWAY, SUITE 100
City-St-Zip: WEST PALM BEACH, FL 33407

Title: MGR ( ) Change (X) Addition
Name: PATEL, AJAY
Address: 1501 NORTHPOINT PARKWAY, SUITE 100
City-St-Zip: WEST PALM BEACH, FL 33407

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: WILLIAM HUDSON MGRM 01/11/2008

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