2008 LIMITED LIABILITY COMPANY FILED **ANNUAL REPORT** Mar 27, 2008 08:00 AN Secretary of State **DOCUMENT # L06000066598** 1. Entity Name F & S CONTRACTORS LLC Principal Place of Business Mailing Address 21006 WEST DIXIE HWY 21006 WEST DIXIE HWY MIAMI, FL 33180 MIAMI, FL 33180 02272008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-5228621 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LOPEZ-AGUIAR, HENRY A DO NOT WRITE 9415 SUNSET DRIVE, SUITE 119 MIAMI, FL 33173 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 U00000872018 04/10/08-80022-001 138.75 MANAGING MEMBERS/MANAGERS 9. TITLE MGR NAME FLEISCHER, SAMUEL 21006 WEST DIXIE HWY STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33180 TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZiP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this fling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 as the properties of the limited liability company or the receiver or trustee as the properties of the limited liability company or the receiver or trustee as the properties of the limited liability company or the receiver or trustee as the properties of the limited liability company or the receiver or trustee as the properties of the limited liability company or the receiver or trustee as the properties of the limited liability company or the receiver or trustee as the properties of the limited liability company or the receiver or trustee as the properties of the limited liability company or the receiver or trustee as the properties of the limited liability company or the receiver or trustee as the properties of the limited liability company or the receiver or trustee as the properties of the limited liability company or the receiver or trustee as the properties of the limited liability company or the receiver of trustee as the properties of the limited liability company or the receiver of the limited liability company or the liability company or

SIGNATURE:

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF BIGHING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

03/24/01

Daytime Phone (