

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000108132

FILED
Nov 07, 2007
Secretary of State**Entity Name:** TDT GENERAL CONSTRUCTION LLC**Current Principal Place of Business:**1879 VINA CT
CHULUOTA, FL 32766**New Principal Place of Business:****Current Mailing Address:**1879 VINA CT
CHULUOTA, FL 32766**New Mailing Address:****FEI Number:** 20-5846836**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GLOBAL INTERGY CORPORATION
1879 VINA CT
CHULUOTA, FL 32766 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: NGUYEN, TROY V
Address: 1879 VINA CT
City-St-Zip: CHULUOTA, FL 32766Title: MGRM () Delete
Name: NGO, VU
Address: 104 SUNDANCE CT
City-St-Zip: WINTER SPRINGS, FL 32708Title: MGRM () Delete
Name: TRAN, DICH
Address: 17804 OLIVE OAK WAY
City-St-Zip: ORLANDO, FL 32820Title: () Delete
Name:
Address:
City-St-Zip:**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:Title: MGRM () Change (X) Addition
Name: NGUYEN, TRUNG
Address: 1884 VINA CT
City-St-Zip: CHULUOTA, FL 32766

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: TROY NGUYEN

MGRM

11/07/2007

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