

**2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L07000081652

**FILED**  
**Mar 20, 2008**  
**Secretary of State****Entity Name:** PARIAL CONSTRUCTION & KEYSTONE RESTORATION, LLC**Current Principal Place of Business:**260 CRANDON BOULEVARD #32, PMB54  
KEY BISCAYNE, FL 331491538**New Principal Place of Business:****Current Mailing Address:**260 CRANDON BOULEVARD #32, PMB54  
KEY BISCAYNE, FL 331491538**New Mailing Address:****FEI Number:** 26-0718378**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**LAVENDER, JOEL R ESQ  
507 S.E. 11TH COURT  
FORT LAUDERDALE, FL 33316 US**Name and Address of New Registered Agent:**PINEDO, ALBERTO  
260 CRANDON BOULEVARD  
SUITE 32, PMB 54  
KEY BISCAYNE, FL 33149 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: ALBERTO PINEDO

03/20/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**Title: MGRM ( ) Delete  
Name: PARIAL, EMMANUEL  
Address: 9251 EDMONT LANE  
City-St-Zip: BOCA RATON, FL 33434Title: MGRM ( ) Delete  
Name: PINEDO, ALBERTO  
Address: 260 CRANDON BOULEVARD #32, PMB54  
City-St-Zip: KEY BISCAYNE, FL 331491538**ADDITIONS/CHANGES:**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: ALBERTO PINEDO

MGRM

03/20/2008

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