

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L97000000476

FILED
Apr 22, 2008
Secretary of State

Entity Name: GAF HOLDINGS L.C.

Current Principal Place of Business:

4440 N.W. 74TH AVENUE
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 527664
MIAMI, FL 331527664

New Mailing Address:

FEI Number: 65-0755191 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PULIDO, GABRIEL
4440 N.W. 74TH AVENUE
MIAMI, FL 33166 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: PULIDO, JANETH
Address: 4440 N.W. 74TH AVENUE
City-St-Zip: MIAMI, FL 33166

Title: MGRM () Delete
Name: PULIDO, GABRIEL
Address: 4440 N.W. 74TH AVENUE
City-St-Zip: MIAMI, FL 33166

Title: MGRM () Delete
Name: PULIDO, GABRIEL E
Address: 4440 N.W. 74TH AVENUE
City-St-Zip: MIAMI, FL 33166

Title: MGRM () Delete
Name: PULIDO, ALBA
Address: 4440 N.W. 74TH AVENUE
City-St-Zip: MIAMI, FL 33166

Title: MGRM () Delete
Name: PULIDO, LUIS F
Address: 4440 N.W. 74TH AVENUE
City-St-Zip: MIAMI, FL 33166

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: () 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: GABRIEL PULIDO

P

04/22/2008

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