

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M99000001457

Entity Name: VSTRUCTURAL LLC

FILED
Jan 22, 2008
Secretary of State

Current Principal Place of Business:

7455 - T NEW RIDGE ROAD
HANOVER, MD 210763143

New Principal Place of Business:

Current Mailing Address:

7455 - T NEW RIDGE ROAD
HANOVER, MD 210763143 US

New Mailing Address:

FEI Number: 52-2113986

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: GREENHAUS, SCOTT
Address: 7455 - T NEW RIDGE ROAD
City-St-Zip: BALTIMORE, MD 210763143

Title: MGRM (X) Delete
Name: CRIGLER, JOHN
Address: 7455 - T NEW RIDGE ROAD
City-St-Zip: BALTIMORE, MD 210763143

Title: MGRM (X) Delete
Name: FANGIO, DANIEL
Address: 7455 - T NEW RIDGE ROAD
City-St-Zip: BALTIMORE, MD 210763143

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SGI HOLDINGS LLC,
Address: 7455 - T NEW RIDGE ROAD
City-St-Zip: BALTIMORE, MD 210763143

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: DANIEL C. FANGIO

MGRM

01/22/2008

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