

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000121863

**FILED**  
**Jan 15, 2008**  
**Secretary of State**

**Entity Name:** AMERICA'S HOME SPECIALIST LLC

**Current Principal Place of Business:**

8297 CHAMPIONS GATE BLVD  
#215  
CHAMPIONS GATE, FL 33896 US

**New Principal Place of Business:**

**Current Mailing Address:**

8297 CHAMPIONS GATE BLVD  
#215  
CHAMPIONS GATE, FL 33896 US

**New Mailing Address:**

**FEI Number:** 83-0483176      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CASTILLO, CARLOS L JR  
109 CHRIS CT.  
DAVENPORT, FL 33896 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: MGR ( ) Delete  
Name: CASTILLO, CARLOS L JR.  
Address: 109 CHRIS CT  
City-St-Zip: DAVENPORT, FL 33896 US

**ADDITIONS/CHANGES:**

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: CARLOS L. CASTILLO JR

MGR.

01/15/2008

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