


2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 16, 2003 8:00 am
Secretary of State

01-16-2003 90230 033 ****50.00

DOCUMENT # L99000004459

1. Entity Name
THE HOME MORTGAGE SPECIALIST, LLC.



Principal Place of Business Mailing Address

**8360 W. OAKLAND PARK BLVD.
101
SUNRISE FL 33351**

**8360 W. OAKLAND PARK BLVD.
101
SUNRISE FL 33351**

2. Principal Place of Business 3. Mailing Address

1820 N. Corporate Lakes Blvd **1820 N. Corporate Lakes Blvd**

Suite, Apt. #, etc. Suite, Apt. #, etc.

111 **111**

City & State City & State

Weston **Weston**

Zip Country Zip Country

33026 **USA** **33026** **USA**



CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0948585

Applied For
 Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**PEDROSA, RICARDO
6650 N.W. 101 TERR
PARKLAND FL 33076**

7. Name and Address of New Registered Agent

Name
Pedrosa Ricardo

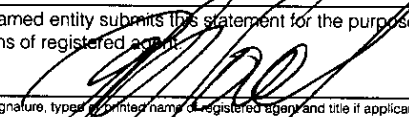
Street Address (P.O. Box Number is Not Acceptable)
1820 N. Corporate Lakes Blvd

Suite 111

City State Zip Code

Weston **FL** **33326**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  DATE: **1/10/03**

Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
MGR	PEDROSA, RICARDO	8360 W OAKLAND PARK BLVD 101	SUNRISE FL 33351	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
MGR	Pedrosa, Ricardo	1820 N. Corporate Lakes Blvd 111	Weston, FL 33326	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  DATE: **1/10/03** Daytime Phone #: **(954) 289-4211**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

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CR2E083 (10/02)