2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 31, 2006
Secretary of State

DOCUMENT# L02000004047

Entity Name: DUPLESSY HOMES, L.L.C.

Current Principal Place of Business:

12050 NW 4 CT
PLANTATION, FL 33325

New Principal Place of Business:

Current Mailing Address:

12050 NW 4 CT
PLANTATION, FL 33325

New Mailing Address:

FEI Number: 01-0622048 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

REGINALD & ETCHIKA PIERRE
12050 NW 4 COURT
PLANTATION, FL 33325 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: P ( ) Delete
Name: PIERRE, ETCHIKA M
Address: 12050 NW 4 CT
City-St-Zip: PLANTATION, FL 33325

Title: VP ( ) Delete
Name: PIERRE, REGINALD
Address: 12050 NW 4 CT
City-St-Zip: PLANTATION, FL 33325

Title: T ( ) Delete
Name: ABRAHAM, MARCK E
Address: 12050 MW 4 CT
City-St-Zip: PLANTATION, FL 33325

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: ETHCIKA PIERRE MRS 08/31/2006

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