

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000025991

FILED
Feb 22, 2007
Secretary of State

Entity Name: MIAMI HOME DESIGN, L.L.C.

Current Principal Place of Business:

1020 E. 32ND ST
HIALEAH, FL 33013

New Principal Place of Business:

240 OLD FEDERAL HWY
120
HALLANDALE, FL 33009

Current Mailing Address:

21117 NE 3 COURT
MIAMI, FL 33179

New Mailing Address:

240 OLD FEDERAL HWY
120
HALLANDALE, FL 33009

FEI Number: 02-2387508

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SERBER, DANIEL J ESQ.
2875 NE 191ST STREET
TURNBERRY PLAZA, SUITE 801
AVENTURA, FL 33180 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: V () Delete
Name: ALTER, HERMAN
Address: 1020 E. 32ND ST
City-St-Zip: HIALEAH, FL 33013

Title: D () Delete
Name: GAMPEL, MOISES
Address: 1020 E 32ND ST.
City-St-Zip: HIALEAH, FL 33013

ADDITIONS/CHANGES:

Title: V (X) Change () Addition
Name: ALTER, HERMAN
Address: 240 OLD FEDERAL HWY #120
City-St-Zip: HALLANDALE, FL 33009

Title: D (X) Change () Addition
Name: GAMPEL, MOISES
Address: 240 OLD FEDERAL HWY #120
City-St-Zip: HALLANDALE, FL 33009

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: HERMAN ALTER

V

02/22/2007

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