

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000030323

Entity Name: HOME SOLUTIONS, LLC

FILED  
May 01, 2008  
Secretary of State

**Current Principal Place of Business:**

465 OCEAN DR.  
905  
MIAMI BEACH, FL 33119

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 191635  
MIAMI BEACH, FL 33119

**New Mailing Address:**

P.O. BOX 9663  
NAPERVILLE, IL 60567

FEI Number: 52-2444788      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:**

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

GIANNOTTI, CHRISTIAN  
465 OCEAN DR.  
905  
MIAMI BEACH, FL 33119 US

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: GIANNOTTI, CHRISTIAN  
Address: P.O. BOX 191635  
City-St-Zip: MIAMI BEACH, FL 33119

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: GIANNOTTI, CHRISTIAN  
Address: P.O. BOX 9663  
City-St-Zip: NAPERVILLE, IL 60567

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: CHRISTIAN GIANNOTTI

MGR

05/01/2008

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