2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000012342

1. Entity Name

HOMEBASE, LLC

FILED Mar 22, 2006 08:00 A **Secretary of State**

Principal Place of Business

19640 WEST SAINT ANDREWS DRIVE

MIAMI, FL 33015

Mailing Address

19640 WEST SAINT ANDREWS DRIVE

MIAMI, FL 33015



DO NOT WRITE IN THIS SPACE

01132006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 05-0576313 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

KING, EDWARD 19640 WEST SAINT ANDREWS DRIVE MIAMI, FL 33015

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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 F	lorida. I am familiar with, and accept
the obligations of registered agent.	·

SIGNATURE

Signature, typed or printed name of registered agent and title it applicable.

(NOTE: Registered Agent signature required when reinstalling)

Filing Fee is \$50.00 Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KING, EDWARD 19640 WEST SAINT ANDREWS DRIVE HIALEAH, FL 33015
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRANTLEY-KING, SANDRA 19640 WEST SAINT ANDREWS DRIVE HIALEAH, FL 33015
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 transfer empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

Edward King, Mapaging Member

3/20/2006

954-232-3056

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

Davime Phone #