

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000015454

FILED
Apr 24, 2004
Secretary of State

Entity Name: INDIGO HOME BUYERS, LLC

Current Principal Place of Business:

20231 SW 114 AVENUE
MIAMI, FL 33189

New Principal Place of Business:

6244 ALASKA AVENUE
NEW PORT RICHEY, FL 34653

Current Mailing Address:

20231 SW 114 AVENUE
MIAMI, FL 33189

New Mailing Address:

6244 ALASKA AVENUE
NEW PORT RICHEY, FL 34653

FEI Number: 30-0240735

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREZ-ALMEIDA, IVETTE
20231 SW 114 AVENUE
MIAMI, FL 33189 US

Name and Address of New Registered Agent:

PEREZ-ALMEIDA, IVETTE
6244 ALASKA AVENUE
NEW PORT RICHEY, FL 34653 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: IVETTE PEREZ-ALMEIDA

04/24/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: PEREZ-ALMEIDA, IVETTE
Address: 20231 SW 114 AVENUE
City-St-Zip: MIAMI, FL 33189

Title: MGRM () Delete
Name: TREMBLAY, MELANI M
Address: 216-707 ESQUIMALT ROAD
City-St-Zip: VICTORIA, BC V9A 3L7 CN

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PEREZ-ALMEIDA, IVETTE
Address: 6244 ALASKA AVENUE
City-St-Zip: NEW PORT RICHEY, FL 34653

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 Section 119.07(3)(i), 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: IVETTE PEREZ-ALMEIDA

MS.

04/24/2004

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