

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000021203

FILED
Mar 21, 2006
Secretary of State

Entity Name: EAGLE ONE MORTGAGE FW INVESTMENT, LLC

Current Principal Place of Business:

1925 S. PERIMETER RD.
#130
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

17190 ROYAL PALM BLVD
SUITE 2
WESTON, FL 33326

Current Mailing Address:

17190 ARVIDA PARKWAY
BLDG H, SUITE 2
WESTON, FL 33326

New Mailing Address:

17190 ROYAL PALM BLVD
SUITE 2
WESTON, FL 33326

FEI Number: 41-2099070

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PADIAL, JOSE I
2600 SOUTH DOUGLAS ROAD
PENTHOUSE 6
CORAL GABLES, FL 33134 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: MGR () Delete
Name: WULFF, MARIA C
Address: 17190 ARVIDA PARKWAY BLDG H, SUITE 2
City-St-Zip: WESTON, FL 33326

Title: MGR (X) Delete
Name: FERNANDEZ, HELY RAMON
Address: 17190 ARVIDA PARKWAY BLDG. H, SUITE 2
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ROCHE, GERMAN
Address: 17190 ARVIDA PARKWAY SUITE 2
City-St-Zip: WESTON, FL 33326

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: GERMAN ROCHE

MGR

03/21/2006

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