

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000028151

FILED
Apr 01, 2005
Secretary of State

Entity Name: HOMEVESTING GROUP, LLC

Current Principal Place of Business:

1304 SW 160 AVENUE #300
WESTON, FL 33326 US

New Principal Place of Business:

Current Mailing Address:

1304 SW 160 AVENUE #300
WESTON, FL 33326 US

New Mailing Address:

FEI Number: 14-1892775

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOGREIRA, CESAR
1304 SW 160 AV.
SUITE 300
WESTON, FL 33326 US

Name and Address of New Registered Agent:

LOGREIRA, CESAR A
1304 SW 160 AVENUE
SUITE 300
WESTON, FL 33326 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: CESAR A LOGREIRA

04/01/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: LOGREIRA, CESAR
Address: 1304 SW 160TH AVENUE, SUITE 300
City-St-Zip: WESTON, FL 33326

Title: MGR () Delete
Name: BERMUDEZ, JOHANNA
Address: 1304 SW 160 AV. SUITE 300
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LOGREIRA, CESAR A
Address: 1304 SW 160TH AVENUE, SUITE 300
City-St-Zip: WESTON, FL 33326

Title: MGR (X) Change () Addition
Name: BERMUDEZ, JOHANNA V
Address: 1304 SW 160 AVENUE, SUITE 300
City-St-Zip: WESTON, FL 33326

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: CESAR A LOGREIRA

MGRM

04/01/2005

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