


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 16, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L03000031817</b> 1. Entity Name <b>HOME DYNAMICS TORINO, LLC</b>	
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Principal Place of Business <b>4788 WEST COMMERCIAL BLVD. TAMARAC, FL 33319</b>	Mailing Address <b>4788 WEST COMMERCIAL BLVD. TAMARAC, FL 33319</b>
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02202006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**56-2389495**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired

☒ **\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**STREIT, THOMAS E  
222 LAKEVIEW AVENUE, SUITE 400  
WEST PALM BEACH, FL 33401**

**DO NOT WRITE  
IN THIS SPACE**

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 Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

000000469778  
03/27/06-80013-012 55.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM SCHACK, DAVID 4788 W COMMERCIAL BLVD TAMARAC, FL 33319</b>
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IN THIS SPACE**

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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

**DAVID SCHACK**

**3/13/06**

**954-484-4800**