2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Oct 04, 2008
Secretary of State

DOCUMENT# L03000032979

Entity Name: HOUSEDIET, LLC

Current Principal Place of Business:

9763 NW 41 STREET
102
DORAL, FL 33139

New Principal Place of Business:

Current Mailing Address:

9763 NW 41 STREET
102
DORAL, FL 33139

New Mailing Address:

FEI Number: 20-0192797 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

INTERAMERICAN CORPORATE SERVICES, LLC
2525 PONCE DE LEóN BLVD
SUITE 1225
MIAMI, 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:	REVUELTA, FELIX	
Address:	RECTOR TRIADO 94	
City-St-Zip:	BARCELONA, SP 08014 SP	
Title:	MGR	( ) Delete
Name:	REVUELTA, VANESSA	
Address:	RECTOR TRIADO 94	
City-St-Zip:	BARCELONA, SP 08014 SP	
Title:	MGR	( ) Delete
Name:	REVUELTA, KILIAN	
Address:	RECTOR TRIADO 94	
City-St-Zip:	BARCELONA, SP 08014 SP	
Title:	MGR	( ) Delete
Name:	CATÁ, JORGE	
Address:	9763 NW 41 STREET, SUITE 102	
City-St-Zip:	DORAL, FL 33178 US	
Title:	MGR	( ) Delete
Name:	SANTANDREU, RAFAEL	
Address:	1441 3RD AVENUE, APT 7A	
City-St-Zip:	NEW YORK, NY 10028 US	
Title:	MGR	( ) Delete
Name:	ROMERO, IGNACIO	
Address:	5229 ALTON ROAD	
City-St-Zip:	MIAMI BEACH, FL 33140 US	

ADDITIONS/CHANGES:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	MGR	(X) Change ( ) Addition
Name:	CREIXELL, JOAQUIN	
Address:	RECTOR TRIADO 94	
City-St-Zip:	BARCELONA, SP 08014 SP	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify 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: JOAQUIN CREIXELL MGR 10/04/2008

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