## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000032979

Entity Name: HOUSEDIET, LLC

FILED May 01, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
9763 NW 4 102	1 STREET	9763 NW 4 102	11 STREET
DORAL, FL	_ 33139	DORAL, FI	_ 33139 US
Current Ma	ailing Address:	New Maili	ng Address:
9763 NW 4 102 DORAL, FL	11 STREET 33139	9763 NW 4 102 DORAL, FI	11 STREET _ 33139 US
FEI Number: In accordanc		mber Not Appl not receive th	icable ( ) Certificate of Status Desired ( )
2525 PONC SUITE 1229 MIAMI, FL	33134 US named entity submits this statement for the purpose		
SIGNATUR			
	Electronic Signature of Registered Agent		Date
MANAGING N	MEMBERS/MANAGERS:	ADDITIONS/0	CHANGES:
Title: Name: Address: City-St-Zip:	MGR () Delete REVUELTA, FELIX RECTOR TRIADO 94 BARCELONA, SP 08014 SP	Title: Name: Address: City-St-Zip:	MGRP (X) Change ( ) Addition REVUELTA, FELIX RECTOR TRIADO 94 BARCELONA, SP 08014 SP
Title: Name: Address: City-St-Zip:	MGR () Delete REVUELTA, VANESSA RECTOR TRIADO 94 BARCELONA, SP 08014 SP	Title: Name: Address: City-St-Zip:	MGR (X) Change ( ) Addition REVUELTA, VANESA RECTOR TRIADO 94 BARCELONA, SP 08014 SP
Title: Name: Address: City-St-Zip:	MGR () Delete REVUELTA, KILIAN RECTOR TRIADO 94 BARCELONA, SP 08014 SP	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR () Delete CREIXELL, JOAQUIN RECTOR TRIADO 94 BARCELONA, SP 08014 SP	Title: Name: Address: City-St-Zip:	MGRS (X) Change ( ) Addition CREIXELL-LLOPIS, JOAQUIN M RECTOR TRIADO 94 BARCELONA, SP 08014 SP
Title: Name: Address: City-St-Zip:	MGR () Delete SANTANDREU, RAFAEL 1441 3RD AVENUE, APT 7A NEW YORK, NY 10028 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR () Delete ROMERO, IGNACIO 5229 ALTON ROAD MIAMI BEACH, FL 33140 US	Title: Name: Address: City-St-Zip:	() Change () Addition

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 M CREIXELL LLOPIS MGR 05/01/2009