

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000035369

**FILED**  
**Apr 12, 2007**  
**Secretary of State**

**Entity Name:** AMERICAN HOME SOLUTIONS, L.L.C.

**Current Principal Place of Business:**

6355 GULF BLVD  
ST PETE BEACH, FL 33706

**New Principal Place of Business:**

**Current Mailing Address:**

6355 GULF BLVD  
ST PETE BEACH, FL 33706

**New Mailing Address:**

5909 BIMINI WAY N  
ST PETE BEACH, FL 33706

**FEI Number:** 76-0743348

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VALDES, ANDREA  
6355 GULF BLVD  
ST PETE BEACH, FL 33706 US

**Name and Address of New Registered Agent:**

VALDES, ANDREA  
5909 BIMINI WAY N  
ST PETE BEACH, FL 33706 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: ANDREA VALDES

04/12/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: VALDES, ANDREA  
Address: 6355 GULF BLVD  
City-St-Zip: ST PETE BEACH, FL 33706

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: VALDES, ANDREA  
Address: 5909 BIMINI WAY N  
City-St-Zip: ST PETE BEACH, FL 33706

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: ANDREA VALDES

MGRM

04/12/2007

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