

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000012566

FILED
Feb 08, 2005
Secretary of State

Entity Name: ARAGON CERTIFIED HOMES, LLC

Current Principal Place of Business:

C/O GABRIEL F. ARAGON
1200 FAU RESEARCH PARK BLVD., SUITE #231
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

C/O GABRIEL F. ARAGON
2305 N. CONGRESS AVE. #23
BOYNTON BEACH, FL 33426

Current Mailing Address:

C/O GABRIEL F. ARAGON
P.O. BOX 8242
DELRAY BEACH, FL 33482

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARAGON, GABRIEL F
1200 FAU RESEARCH PARK BLVD., SUITE #231
DEERFIELD BEACH, FL 33441 US

Name and Address of New Registered Agent:

ARAGON, GABRIEL F
2305 N. CONGRESS AVE.
#23
BOYNTON BEACH, FL 33426 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: GABRIEL F. ARAGON

02/08/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: ARAGON, GABRIEL F
Address: P.O. BOX 8242
City-St-Zip: DELRAY BEACH, FL 33482

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GABRIEL F. ARAGON

MR.

02/08/2005

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