

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000016490

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: HOME AUTOMATION TECHNOLOGIES, LLC

**Current Principal Place of Business:**

9318 KETAY CIRCLE  
BOCA RATON, FL 33428

**New Principal Place of Business:**

**Current Mailing Address:**

9318 KETAY CIRCLE  
BOCA RATON, FL 33428

**New Mailing Address:**

FEI Number: 20-0808235

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SANCHEZ, CAMILO F  
877 NW 208 DR  
PEMBROKE PINES, FL 33029 US

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

SANCHEZ, CAMILO F  
9318 KETAY CIRCLE  
BOCA RATON, FL 33428 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:

04/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: QUASAR POINT GROUP CORP  
Address: 9318 KETAY CIRCLE  
City-St-Zip: BOCA RATON, FL 33428

Title: MGRM ( ) Delete  
Name: SANCHEZ, CAMILO F  
Address: 877 NW 208 DR.  
City-St-Zip: PEMBROKE PINES, FL 33029

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: SANCHEZ, CAMILO F  
Address: 9318 KETAY CIRCLE  
City-St-Zip: BOCA RATON, FL 33428

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: CAMILO F SANCHEZ

PDT

04/30/2009

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