2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000029295

City-St-Zip:

Entity Name: HOME INVEST SOLUTIONS, LLC

FILED Apr 21, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 265 NE 119TH STREET 265 NW 119TH STREET MIAMI, FL 33168 MIAMI, FL 33168 **Current Mailing Address: New Mailing Address:** 265 NE 119TH STREET P.O. BOX 530081 MIAMI, FL 33168 MIAMI, FL 33153 FEI Number: 20-1101078 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JEAN-BAPTISTE, MAURICE JEAN-BAPTISTE, MAURICE 265 NE 119TH STREET 265 NW 119TH STREET MIAMI, FL 33168 MIAMI, FL 33168 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: 04/21/2005 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES: () Delete Title: () Change (X) Addition JEAN-BAPTISTE, MAURICE Name: Name: Address: Address: 265 NW 119 ST City-St-Zip: City-St-Zip: MIAMI, FL 33168 Title: Title: MGRM () Change (X) Addition () Delete LAURENT, EMMANUEL Name: Name: Address: Address: 265 NW 119 STEET City-St-Zip: City-St-Zip: MIAMI, FL 33168 Title: () Delete Title: MGRM () Change (X) Addition JAEN BAPTISTE, JUNA Name: Name: 1353 NE 117 STREET Address: Address:

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.

City-St-Zip:

MIAMI, FL 33161

SIGNATURE: MAURICE JEAN-BAPTISTE MGR 04/21/2005