2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000077591

1. Entity Name
MY HOUSE REALTY LLC



FILED Sep 14, 2006 08:00 AN Secretary of State

Principal Place of Business

18243 PINES BLVD PEMBROKE PINES, FL 33029 Mailing Address

18243 PINES BLVD

PEMBROKE PINES, FL 33029



08012006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-1812507

S. Certificate of Status Desired

Applied For
Not Applicable

\$5.00 Additional
Fee Required

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6. Name and Address of Current Registered Agent

CORPORATE CREATIONS NETWORK, INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL. 33410

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The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florid	 I am familiar with, and accept
the obligations of registered agent.	

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee Is \$50.00 Due by September 6, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SANTANA, MARIO J BROKER 18243 PINES BLVD PEMBROKE PINES, FL 33029
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ROJAS, ANTONIO J SR 18243 PINES BLVD PEMBROKE PINES, FL 33029
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FANO, CARLOS E SR 18243 PINES BLVD PEMBROKE PINES, FL 33029
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE ' NAME STREET ADDRESS, CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	•

U00000576784 09/14/06-80002-009 55.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 ne/receiver or trustee oppowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE FROM Sun