

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000083757

FILED  
Mar 19, 2007  
Secretary of State

Entity Name: HOMES DIRECT INTL. LLC

**Current Principal Place of Business:**

1355 NW 97 AVE. #200  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

1355 NW 97 AVE. #200  
MIAMI, FL 33172

**New Mailing Address:**

FEI Number: 42-1651512

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORREA, MIGUEL  
10365 N.W. 48TH STREET  
MIAMI, FL 33178 US

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

HOMES DIRECT GROUP  
10365 N.W. 48TH STREET  
MIAMI, FL 33178 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: RAQUEL CORREA

03/19/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: HOMES DIRECT GROUP L, LC  
Address: 10200 NW 25 ST. #109  
City-St-Zip: DORAL, FL 33172

Title: V ( ) Delete  
Name: CORREA, RAQUEL  
Address: 10200 NW 25 ST. #109  
City-St-Zip: DORAL, FL 33172

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: HOMES DIRECT GROUP L, LC  
Address: 1355 NW 97 AVE SUITE 200  
City-St-Zip: DORAL, FL 33172

Title: V (X) Change ( ) Addition  
Name: CORREA, RAQUEL  
Address: 1355 NW 97 AVE SUITE 200  
City-St-Zip: DORAL, FL 33172

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: RAQUEL CORREA

V

03/19/2007

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