2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000005897

Entity Name: HOME PROS GUIDE, LLC

FILED Feb 16, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

700 SW 108 AVE 5000 S HARBOR ISLES DR

BUILDING 36, APT # 101 # 2401

PEMBROKE PINES, FL 33025 FT-LAUDERDALE, FL 33312

Current Mailing Address: New Mailing Address:

700 SW 108 AVE 5000 S HARBOR ISLES

BUILDING 36, APT # 101 # 2401

PEMBROKE PINES, FL 33025 FT-LAUDERDALE, FL 33312

FEI Number: 20-2189635 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:

POWELL, NEOMI POWELL, NEOMI

700 SW 108 AVE 5000 S HARBOR ISLES DR

BUILDING 36, APT # 101 #2401

PEMBROKE PINES, FL 33025 US FT-LAUDERDALE, FL 33312 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: NEOMI POWELL 02/16/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 POWELL, NEOMI
 Name:
 POWELL, NEOMI

 Address:
 700 SW 108 AVE BUILDING 36, APT # 101
 Address:
 5000 S HARBOR ISLES DR, #2401

City-St-Zip: PEMBROKE PINES, FL 33025 City-St-Zip: FT-LAUDERDALE, FL 33312

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: ORYON, YASMIN S Name: ORYON, YASMIN S

 Address:
 700 SW 108 AVE BUILDING 36, APT # 101
 Address:
 5000 S HARBOR ISLES DR, #2401

 City-St-Zip:
 PEMBROKE PINES, FL 33025
 City-St-Zip:
 FT-LAUDERDALE, FL 33312

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: YASMIN ORYON MGR 02/16/2006