

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000020222

FILED  
May 07, 2006  
Secretary of State

Entity Name: XTREME HOME INSPECTION, L.L.C

## Current Principal Place of Business:

5010 NOB HILL ROAD  
330  
SUNRISE, FL 33351 US

## New Principal Place of Business:

## Current Mailing Address:

5010 NOB HILL ROAD  
330  
SUNRISE, FL 33351 US

## New Mailing Address:

FEI Number: 71-0978677      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

## Name and Address of New Registered Agent:

MEJIA, RAYMOND OWNER  
5010 NOB HILL ROAD  
330  
SUNRISE, FL 33351 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:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: MEJIA, RAYMOND OWNER  
Address: 5010 NOBHILL ROAD  
City-St-Zip: SUNRISE, FL 33351 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: MEJIA, RAYMOND OWNER  
Address: 5010 NOB HILL ROAD  
City-St-Zip: SUNRISE, FL 33351 US

Title: MGR ( ) Change (X) Addition  
Name: HERRERA, YAMILE CFO  
Address: 5010 NOB HILL ROAD  
City-St-Zip: SUNRISE, FL 33351 US

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: RAYMOND MEJIA

MGR

05/07/2006

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