

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000064501

**FILED**  
**Feb 08, 2008**  
**Secretary of State**

**Entity Name:** MY HOUSE REAL ESTATE, LLC

**Current Principal Place of Business:**

10634 VERSAILLES BOULEVARD  
WELLINGTON, FL 33467

**New Principal Place of Business:**

3138 NORTH OASIS DR.  
BOYNTON BEACH, FL 33426

**Current Mailing Address:**

10634 VERSAILLES BOULEVARD  
WELLINGTON, FL 33467

**New Mailing Address:**

3138 NORTH OASIS DR.  
BOYNTON BEACH, FL 33426

**FEI Number:** 20-3075132

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STROTHMAN, NICOLE  
418 SOUTH ALBANY, #2  
TAMPA, FL 33607 US

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

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: MY HOUSE REAL ESTATE, , INC.  
Address: 1802 N. CARSON ST., STE. 212  
City-St-Zip: CARSON CITY, NV 89701

Title: MGRM (X) Delete  
Name: WAUGH, JOSHUA D  
Address: 10634 VERSAILLES BLVD  
City-St-Zip: WELLINGTON, FL 33467

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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:** MY HOUSE REAL ESTATE, INC.

MGR

02/08/2008

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