

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000087936

FILED  
Apr 30, 2006  
Secretary of State

Entity Name: 6090 SOUTHWEST 78TH STREET, LLC

## Current Principal Place of Business:

13728 SOUTHWEST 149TH CIRCLE LANE, UNIT 1  
MIAMI, FL 33186

## New Principal Place of Business:

## Current Mailing Address:

13728 SOUTHWEST 149TH CIRCLE LANE, UNIT 1  
MIAMI, FL 33186

## New Mailing Address:

FEI Number: 20-3458515

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CERTAIN, MAURICIO  
13728 SOUTHWEST 149TH CIRCLE LANE, UNIT 1  
MIAMI, FL 33186 US

## Name and Address of New Registered Agent:

WESTON CORPORATE ADMINISTRATION LLC  
17120 ROYAL PALM BLVD  
3  
WESTON, FL 33326 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: JACQUELINE F RODRIGUEZ

04/30/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: LUCKY HOMES GROUP, L, LC  
Address: 13728 SOUTHWEST 149TH CIRCLE LANE, UNIT 1  
City-St-Zip: MIAMI, FL 33186

Title: MGR ( ) Delete  
Name: LEME, LLC,  
Address: PO BOX 823514  
City-St-Zip: MIAMI, FL 33082

## 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 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: MAURICIO CERTAIN

MGR

04/30/2006

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