

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000088844

FILED
Apr 25, 2006
Secretary of State

Entity Name: FORECLOSURE SERVICES, LLC

Current Principal Place of Business:

15025 NW 77TH AVENUE STE 312
MIAMI LAKES, FL 33014

New Principal Place of Business:

15025 NW 77TH AVENUE
STE 312
MIAMI LAKES, FL 33014

Current Mailing Address:

15025 NW 77TH AVENUE STE 312
MIAMI LAKES, FL 33014

New Mailing Address:

15025 NW 77TH AVENUE
STE 312
MIAMI LAKES, FL 33014

FEI Number: 20-3434153

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

AGUILAR, REINA
15025 NW 77TH AVENUE
SUITE 312
MIAMI, FL 33014 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: REINA AGUILAR

04/25/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: AGUILAR, WILFREDO A
Address: 15025 NW 77TH AVENUE STE 312
City-St-Zip: MIAMI LAKES, FL 33014

Title: MGR () Delete
Name: AGUILAR, REINA S
Address: 15025 NW 77TH AVENUE STE 312
City-St-Zip: MIAMI LAKES, FL 33014

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: REINA AGUILAR

MGR

04/25/2006

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