

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000101772

FILED  
Sep 09, 2011  
Secretary of State

**Entity Name:** HOME SOLUTIONS EXPRESS, LLC

**Current Principal Place of Business:**

402 BROADWAY E.  
SUITE 1A  
FORT MEADE, FL 33841 US

**New Principal Place of Business:**

402 E. BROADWAY.  
SUITE 1C  
FORT MEADE, FL 33841 US

**Current Mailing Address:**

402 BROADWAY E.  
SUITE 1A  
FORT MEADE, FL 33841 US

**New Mailing Address:**

402 E. BROADWAY.  
SUITE 1C.  
FORT MEADE, FL 33841 US

**FEI Number:** 20-3650345

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HAGSTROM, CARL J MR  
402 BROADWAY E.  
APT.#3  
FORT MEADE, FL 33841 US

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

HAGSTROM, CARL J MR  
402 E. BROADWAY..  
SUITE 1C  
FORT MEADE, FL 33841 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: CARL J. HAGSTROM

09/09/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HAGSTROM, CARL  
Address: 402 E. BROADWAY. SUITE 1C  
City-St-Zip: FORT MEADE, FL 33841 US

I hereby 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: CARL J. HAGSTROM

MGRM

09/09/2011

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