2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000022963

Entity Name: LIFESTYLE CONSTRUCTION LLC

FILED Jan 08, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

320 N. CONGRESS AVE DELRAY BEACH, FL 33445 US

Current Mailing Address: New Mailing Address:

320 N. CONGRESS AVE DELRAY BEACH, FL 33445 US

FEI Number: 20-4468221 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CUPAIOLE, MICHEAL CUPAIOLE, MICHAEL 3817 COELEBS AVE. 3817 COELEBS AVE.

BOYNTON BEACH, FL 33436 US BOYNTON BEACH, FL 33436 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: MICHAEL CUPAIOLE 01/08/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 CUPAIOLE, MICHAEL
 Name:

 Address:
 320 N. CONGRESS AVE
 Address:

 City-St-Zip:
 DELRAY BEACH, FL 33445 US
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 CUPAIOLE, KATHLEEN
 Name:

 Address:
 320 N. CONGRESS AVE
 Address:

 City-St-Zip:
 DELRAY BEACH, FL 33445 US
 City-St-Zip:

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change \ () Addition}$

 Name:
 BRAVO, VLADIME
 Name:
 BRAVO, VLADIMER

 Address:
 2962 NW 46 ST
 Address:
 2962 NW 46 ST

 City-St-Zip:
 MIAMI, FL 33142
 City-St-Zip:
 MIAMI, FL 33142

Title: V () Delete Title: V (X) Change () Addition

 Name:
 MANOR, OSCAR
 Name:
 MUNOZ, OSCAR

 Address:
 1980 NW 4TH AVE
 Address:
 1980 NW 4TH AVE

 City-St-Zip:
 BOCA RATON, FL 33432
 City-St-Zip:
 BOCA RATON, FL 33432

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: MICHAEL CUPAIOLE MGRM 01/08/2008