

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L07000108976

FILED
Aug 25, 2009
Secretary of State**Entity Name:** HOME CENTER U.S.A., LLC**Current Principal Place of Business:**9103 NW 105 CIRCLE
MEDLEY, FL 33178 US**New Principal Place of Business:****Current Mailing Address:**9103 NW 105 CIRCLE
MEDLEY, FL 33178 US**New Mailing Address:****FEI Number:** 26-1349120**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BRYN, MARK
2 SOUTH BISCAYNE BOULEVARD
SUITE 2680
MIAMI, FL 33131 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:** MGRM () Delete
Name: SANTEUSANIO, MARCELO
Address: 9103 NW 105 CIRCLE
City-St-Zip: MEDLEY, FL 33178**Title:** MGRM (X) Delete
Name: NOVOA, FRANCISCO
Address: 9103 NW 105 CIRCLE
City-St-Zip: MEDLEY, FL 33178**ADDITIONS/CHANGES:****Title:** MGRM (X) Change () Addition
Name: NOVOA, FRANCISCO
Address: 9103 NW 105 CIRCLE
City-St-Zip: MEDLEY, FL 33178**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: FRANCISCO NOVOA

MGRM

08/25/2009

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