2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2011
Secretary of State

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Entity Name: EPICUREAN HOMES REALTY, LLC

Current Principal Place of Business:

17100 COLLINS AVE
224
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

17100 COLLINS AVE
224
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

FEI Number: 90-0492950 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CUFFIA, ALEXANDER
17100 COLLINS AVE
224
SUNNY ISLES BEACH, FL 33160 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: MGR
Name: CUFFIA, ANA
Address: 17100 COLLINS AVE, SUITE 224
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGRM
Name: ALEXANDER CUFFIA, PA
Address: 17100 COLLINS AVENUE. SUITE 224
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGRM
Name: GRACAR, LLC
Address: 17100 COLLINS AVE # 224
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGRM
Name: DUO INVESTMENTS MA, LLC
Address: 17100 COLLINS AVENUE. SUITE 220
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGRM
Name: OABF REAL ESTATE HOLDINGS, LLC
Address: 17100 COLLINS AVE # 224
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGRM
Name: DANISA HOLDINGS, LLC
Address: 17100 COLLINS AVE # 224
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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 Statues.

SIGNATURE: ALEXANDER CUFFIA MGRM 04/21/2011

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