

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000082322

**FILED**  
**Apr 10, 2012**  
**Secretary of State**

**Entity Name:** EUROHABITAT HOMES, LLC.

**Current Principal Place of Business:**

2100 PONCE DE LEON BLVD.  
SUITE 1175  
MIAMI, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 561990  
MIAMI, FL 33256 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

GUGLIOTTA, EDMUNDO J MR.  
2100 PONCE DE LEON BLVD.  
SUITE 1175  
MIAMI, FL 33134 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  
**Name:** GUGLIOTTA, EDMUNDO J MR.  
**Address:** PO BOX 561990  
**City-St-Zip:** MIAMI, FL 33256

**Title:** MGRM  
**Name:** GUGLIOTTA, MARZIA  
**Address:** PO BOX 561990  
**City-St-Zip:** MIAMI, FL 33256

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:** EDMUNDO GUGLIOTTA

MNGR

04/10/2012

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