

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000002127

**FILED**  
**Mar 29, 2004**  
**Secretary of State**

**Entity Name:** DIRECT HOME CAPITAL LLC

**Current Principal Place of Business:**

1301 N. CONGRESS AVE  
STE 120  
BOYNTON BEACH, FL 33426

**New Principal Place of Business:**

**Current Mailing Address:**

1301 N. CONGRESS AVE  
STE 120  
BOYNTON BEACH, FL 33426

**New Mailing Address:**

**FEI Number:** 72-1511698      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KOWALEWSKI, ROMAN  
517 AYLESBURY RD.  
DELRAY BEACH, FL 33444      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/MEMBERS:**

Title: MGR      ( ) Delete  
Name: KOWALEWSKI, ROMAN  
Address: 517 AYLESBURY RD.  
City-St-Zip: DELRAY BEACH, FL 33444

Title: MGR      ( ) Delete  
Name: MADRY, KAZ  
Address: 37-14 86TH ST  
City-St-Zip: JACKSON HEIGHTS, NY 11372

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR      (X) Change ( ) Addition  
Name: MADRY, KAZ  
Address: 3214 TUSCANY WAY  
City-St-Zip: BOYNTON BEACH, FL 33435

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROMAN KOWALEWSKI      MGR      03/29/2004

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