


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 07, 2005 08:00 AM
Secretary of State

DOCUMENT # M04000003510 1. Entity Name HOUSE, LLC	
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Principal Place of Business 9000 ROLLING KNOLL CT. LAS VEGAS, NV 89134	Mailing Address 9000 ROLLING KNOLL CT. LAS VEGAS, NV 89134
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DO NOT WRITE IN THIS SPACE



02232005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 88-0497988	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

PALMIERI, ANDRENA
7833 HIGHWATER DRIVE M-8
NEW PORT RICHEY, FL 34655

**DO NOT WRITE
IN THIS SPACE**

6. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ANDRENA PALMIERI (NOTE: Registered Agent signature required when restoring) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOUSE-MYERS, BEVERLY 9580 W. SAHARA AVE., STE. 200 LAS VEGAS, NV 891178810
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Beverly Myers 2/24/05 702-258-2812
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #