

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M05000006515

FILED
Jul 09, 2007
Secretary of State

Entity Name: ENVIROHOME, LLC

Current Principal Place of Business:

2200 NW 32ND STREET
POMPANO BEACH, FL 33069

New Principal Place of Business:

2200 NW 32ND STREET
SUITE 400
POMPANO BEACH, FL 33069

Current Mailing Address:

1011 SHOTGUN ROAD
SUNRISE, FL 33326

New Mailing Address:

FEI Number: 20-3805308 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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: CAPRI ENGINEERING, L, LC
Address: 1011 SHOTGUN ROAD
City-St-Zip: SUNRISE, FL 33326

Title: MGRM () Delete
Name: ENVIROHOME, INC.,
Address: 2200 NW 32ND STREET
City-St-Zip: POMPANO BEACH, FL 33069

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGRM () Change (X) Addition
Name: WINSLOW, KELLY S MGRM
Address: 2200 NW 32ND STREET, #400
City-St-Zip: POMPANO BEACH, FL 33069

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: KELLY S. WINSLOW

MGRM

07/09/2007

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