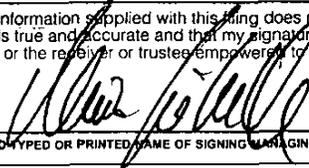


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 07, 2008 8:00 am
Secretary of State

03-07-2008 90223 011 ***138.75

DOCUMENT # M06000002548					
1. Entity Name VARIANT HOUSE LLC					
Principal Place of Business 6625 MIAMI LAKES DRIVE, SUITE 243 MIAMI LAKES, FL 33014			Mailing Address 6625 MIAMI LAKES DRIVE, SUITE 243 MIAMI LAKES, FL 33014		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		02112008 Chg-LLC CR2E083 (12/06)	
Zip		Country		4. FEI Number 20-5029739	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
8. 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			Make check payable to Florida Department of State		
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE	MGRM	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIEBERTH, MARIO		NAME		
STREET ADDRESS	ROSTOCKER STRASSE 19		STREET ADDRESS		
CITY - ST - ZIP	34225 BAUNATAL, GERMANY,		CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: 			Date: 2/25/08		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		

ATTACHMENT

60013066
#M0600000 2548

Absender

Varianthouse LLC

Unser Zeichen

Datum

03/03/08

Kurzbrief

Thema:

- | | | |
|--------------------------------------|--|--|
| <input type="checkbox"/> Erledigung | <input type="checkbox"/> Kenntnisnahme | <input type="checkbox"/> Sie erhalten: |
| <input type="checkbox"/> Rücksprache | <input type="checkbox"/> Weitergabe | <input type="checkbox"/> Anlagen |
| <input type="checkbox"/> Verbleib | <input type="checkbox"/> Stellungnahme | <input type="checkbox"/> wie gewünscht |

/ Fax

Empfänger

Division of Corporations
P.O. Box 6478
Tallahassee, FL 32314
USA

Abend: After 03/03/08

New Address!

Varianthouse LLC

281 SW 87 Path
Miami, FL 33174

Ihre Nachricht vom

drinkuth
Fenster- und Haustürsysteme

• Attention **New Address!**

Varianthouse LLC
281 SW 87 Path
Miami, FL 33174