

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000062858

FILED
Apr 07, 2006
Secretary of State

Entity Name: BRILLIANT MARBLE, L.C.

Current Principal Place of Business:

19195 NE 36 CT., SUITE #2807
AVENTURA, FL 33180

New Principal Place of Business:

19195 NE 36 CT., SUITE # 2807
AVENTURA, FL 33180

Current Mailing Address:

19195 NE 36 CT., SUITE #2807
AVENTURA, FL 33180

New Mailing Address:

19195 NE 36 CT., SUITE # 2807
AVENTURA, FL 33180

FEI Number: 37-1512546

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TJUTINS, IGORS
19195 NE 36 CT., APT #2807
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

TJUTINS, IGORS
19195 NE 36 CT., APT # 2807
AVENTURA, FL 33180 US

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: I.TJUTINS

04/07/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TJUTINS, IGORS
Address: 19195 NE 36 CT., APT 2807
City-St-Zip: AVENTURA, FL 33180

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TJUTINS, IGORS
Address: 19195 NE 36 CT., APT # 2807
City-St-Zip: AVENTURA, FL 33180

Title: MGRM () Change (X) Addition
Name: VORONKOVA, IRINA
Address: 19195 NE 36 CT., APT # 2807
City-St-Zip: AVENTURA, FL 33180

I hereby certify that the information supplied with this filing does not qualify for the 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: I.TJUTINS

MGRM

04/07/2006

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