2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000074098

Entity Name: PRECISION TILE & STONE WORKS, LLC

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

924 SCENIC OAK LANE

FORT WALTON BEACH, FL 32547 US

Current Mailing Address: New Mailing Address:

924 SCENIC OAK LANE

FORT WALTON BEACH, FL 32547 US

FEI Number: 26-0547351 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

DA SILVA, NICOLE A

924 SCENIC OAK LANE

DA SILVA, MARCILIO S
924 SCENIC OAK LANE

FORT WALTON BEACH, FL 32547 US FORT WALTON BEACH, FL 32547 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: MARCILIO DA SILVA 04/29/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 DA SILVA, MARCILIO
 Name:

 Address:
 924 SCENIC OAK LANE
 Address:

 City-St-Zip:
 FORT WALTON BEACH, FL 32547 US
 City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 DA SILVA, NICOLE
 Name:
 DA SILVA, EDIVANDER E

 Address:
 924 SCENIC OAK LANE
 Address:
 1150 AIRPORT ROAD, APT 153

 City-St-Zip:
 FORT WALTON BEACH, FL 32547 US
 City-St-Zip:
 DESTIN, FL 32541 US

Title: () Delete Title: MGRM () Change (X) Addition

 Name:
 Name:
 DA SILVA, MARCIO A

 Address:
 Address:
 1150 AIRPORT ROAD, APT 153

 City-St-Zip:
 City-St-Zip:
 DESTIN, FL 32541 US

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: MARCILIO DA SILVA MGMR 04/29/2009