


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 02, 2007 08:00 A
Secretary of State

DOCUMENT # L04000003069 1. Entity Name ALL PRO TILE & MARBLE, LLC	
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Principal Place of Business 118 DELL RD. FT. WALTON BEACH, FL 32547	Mailing Address 118 DELL RD. FT. WALTON BEACH, FL 32547
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DO NOT WRITE IN THIS SPACE



04272007No Chg-LLC

CR2E083 (11/05)

4. FEI Number 86-1092848	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent METTE, VICTOR J 118 DELL RD. FT. WALTON BEACH, FL 32547
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**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

U00000757142
05/23/07-80059-013 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM METTE, VICTOR J 118 DELL RD. FT. WALTON BEACH, FL 32547
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM METTE, BRYAN L 118 DELL RD. FT. WALTON BEACH, FL 32547
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IN THIS SPACE**

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: Vicktor J mette 4/29/07 (850) 376-1501
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #