2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000000514

RALEIGH, NC 27615 US

City-St-Zip:

Entity Name: TILE FASHIONS, LLC

FILED Apr 20, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7511 MOURNING DOVE ROAD SUITE 104 RALEIGH, NC 27615 **New Mailing Address: Current Mailing Address:** 7511 MOURNING DOVE ROAD SUITE 104 RALEIGH, NC 27615 FEI Number: 01-0564322 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KNIGHT, JEFFERSON P 777 BRICKELL AVE., STE. 1070 MIAMI, FL 33131 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/MEMBERS: ADDITIONS/CHANGES:** MGR Title: () Change () Addition () Delete APPLICABLE, NOT Name: Name: 7511 MOURNING DOVE ROAD - STE 104 Address: Address: RALEIGH, NC 27165 US City-St-Zip: City-St-Zip: Title: MGR () Delete Title: () Change () Addition APPLICABLE, NOT Name: Name: Address: 7511 MOURNING DOVE ROAD - STE 104 Address: City-St-Zip: RALEIGH, NC 27615 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition APPLICABLE, NOT Name: Name: 7511 MOURNING DOVE ROAD - STE 104 Address: Address: City-St-Zip: RALEIGH, NC 27615 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: HOWARD, GREG Name: 7511 MOURNING DOVE ROAD - STE 104 Address: Address: City-St-Zip: RALEIGH, NC 27615 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition HOWARD, MERCEDES V Name: Name: 7511 MOURNING DOVE ROAD - STE 104 Address: Address: City-St-Zip: RALEIGH, NC 27615 US City-St-Zip: Title: () Delete Title: () Change () Addition APPLICABLE, NOT Name: Name: Address: 7511 MOURNING DOVE ROAD - STE 104 Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: GREG HOWARD MGRM 04/20/2004