2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 09, 2006
Secretary of State

DOCUMENT# L02000000514

Entity Name: TILE FASHIONS, LLC

Current Principal Place of Business:

4030 WAKE FOREST RD.
SUITE 300
RALEIGH, NC 27609 US

New Principal Place of Business:

Current Mailing Address:

4030 WAKE FOREST RD.
SUITE 300
RALEIGH, NC 27609 US

New Mailing Address:

FEI Number: 01-0564322 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KNIGHT, JEFFERSON P
777 BRICKELL AVE., STE. 1070
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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/MANAGERS:

Title:	MGR	( ) Delete
Name:	APPLICABLE, NOT	
Address:	4030 WAKE FOREST RD., SUITE 300	
City-St-Zip:	RALEIGH, NC 27609 US	
Title:	MGR	( ) Delete
Name:	APPLICABLE, NOT	
Address:	4030 WAKE FOREST RD., SUITE 300	
City-St-Zip:	RALEIGH, NC 27609 US	
Title:	MGR	( ) Delete
Name:	APPLICABLE, NOT	
Address:	4030 WAKE FOREST RD., SUITE 300	
City-St-Zip:	RALEIGH, NC 27609 US	
Title:	MGRM	( ) Delete
Name:	HOWARD, GREG	
Address:	4030 WAKE FOREST RD., SUITE 300	
City-St-Zip:	RALEIGH, NC 27609 US	
Title:	MGR	( ) Delete
Name:	HOWARD, MERCEDES V	
Address:	4030 WAKE FOREST RD., SUITE 300	
City-St-Zip:	RALEIGH, NC 27609 US	
Title:	MGR	( ) Delete
Name:	APPLICABLE, NOT	
Address:	4030 WAKE FOREST RD., SUITE 300	
City-St-Zip:	RALEIGH, NC 27609 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: GREG HOWARD MGRM 04/09/2006

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