

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000006381

FILED
May 01, 2007
Secretary of State

Entity Name: SHAMROCK FLOORING LLC

Current Principal Place of Business:

4371 NORTHLAKE BLVD
309
PALM BEACH GARDENS, FL 33410 US

New Principal Place of Business:

16620 79TH TERRACE NORTH
PALM BEACH GARDENS, FL 33418 US

Current Mailing Address:

4371 NORTHLAKE BLVD
309
PALM BEACH GARDENS, FL 33410 US

New Mailing Address:

16620 79TH TERRACE NORTH
PALM BEACH GARDENS, FL 33418 US

FEI Number: 74-3030751 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BLASKO, MARIAN
4371 NORTHLAKE BLVD
309
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

BLASKO, MARIAN
16620 79TH TERRACE NORTH
PALM BEACH GARDENS, FL 33418 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: MARIAN BLASKO

05/01/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BLASKO, MARIAN
Address: 4371 NORTHLAKE BLVD STE 309
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BLASKO, MARIAN
Address: 16620 79TH TERRACE NORTH
City-St-Zip: PALM BEACH GARDENS, FL 33418 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: MARIAN BLASKO

MGRM

05/01/2007

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