2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # L02000016814

1. Entity Name

TILE OUTLETS OF AMERICA, FLORIDA LLC



Principal Place of Business Mailing Address

13460 DANIELS COMMERCE BLVD. FORT MYERS, FL 33912

3845 HOLCOMB BRIDGE RD STE 100 NORCROSS, GA 30092

FILED Jan 23, 2006 8:00 am Secretary of State

01-23-2006 90136 026 ****50.00



DO NOT WRITE IN THIS SPACE

01052006 No Chg-LLC

CR2E083 (11/05)

Applied For 4. FEI Number 01-0730273 Not Applicable \$5.00 Additional 5. Certificate of Status Desired

Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

AGENTS AND CORPORATION, INC. 773 4TH AVE N STE E NAPLES, FL 34102

SIGNATURE:

DO NOT WRITE IN THIS SPACE

 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	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating) DATE
Filing Fee Is \$50.00 Due by May 1, 2006		
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RAPP, CURT 3845 HOLCOMB BRIDGE RD #100 NORCROSS, GA 30092	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ARONIN, DONALD 3845 HOLCOMB BRIDGE RD #100 NORCROSS, GA 30092	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADORESS CITY-ST-ZIP		

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 tractee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE