


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 05, 2006 8:00 am
Secretary of State

07-05-2006 90104 043 ****50.00

DOCUMENT # L03000036449 1. Entity Name ACE GRANITE, LLC					
Principal Place of Business 1650 S POWERLINE ROAD SUITE #D DEERFIELD BEACH, FL 33442 US			Mailing Address 1650 S POWERLINE ROAD SUITE #D DEERFIELD BEACH, FL 33442 US		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country			
		05232006 Chg-LLC CR2E083 (11/05)			
		4. FEI Number 83-0374677		Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent BRUTTELL TAX SERVICES 261 NW 16TH STREET POMPANO BEACH, FL 33060			7. Name and Address of New Registered Agent Name Lin, Song Street Address (P.O. Box Number is Not Acceptable) 1650 S Powerline Road, Suite #D City Deerfield Beach FL Zip Code 33442		
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 <input checked="" type="checkbox"/> <i>[Signature]</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		Song Lin <i>6/30/06</i> <small>(NOTE: Registered Agent signature required when reinstating)</small>		DATE	
Filing Fee is \$50.00 Due by September 6, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LIN, SONG 1650 S POWERLINE ROAD #D DEERFIELD BEACH, FL 33442 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <input checked="" type="checkbox"/> <i>[Signature]</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		Song Lin <i>6/30/06</i> <small>Date</small>		(954)427-3454 <small>Daytime Phone #</small>	