



**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 05, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L03000044552</b> 1. Entity Name <b>IDEAL CERAMIC TILE LLC</b>	
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Principal Place of Business <b>816 BILLS CIRCLE BRANDON, FL 33511 US</b>	Mailing Address <b>816 BILLS CIRCLE BRANDON, FL 33511 US</b>
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**DO NOT WRITE IN THIS SPACE**

  
05012008No Chg-LLC CR2E083 (12/07)

4. FEI Number <b>55-0852065</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**KASAK, BRIAN P  
816 BILLS CIRCLE  
BRANDON, FL 33511**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

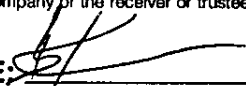
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>MGRM KASAK, BRIAN P 816 BILLS CIRCLE BRANDON, FL 33511</b>
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U000000846515  
05/30/08-80054-001 138.75

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**  **BRIAN P. KASAK** **04-30-08** **813-657-9378**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #