2006 LIMITED LIABILITY COMPANY

DO NOT WRITE IN THIS SPACE

ANNUAL REPORT

DOCUMENT # L03000048742 1. Entity Name

CC'S SOLID SURFACE, LLC

Principal Place of Business

13433 CHAMBORD STREET BROOKSVILLE, FL 34606 US Mailing Address 13433 CHAMBORD STREET BROOKSVILLE, FL 34606

FILED Apr 03, 2006 08:00 AM Secretary of State



03212006No Chg-LLC

CR2E083 (11/05)

Даунта Рпона **я**

4. FEI Number 20-0450168 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GIOVINCO, IAN 7215 HIAWATHA PARKWAY SPRING HILL, FL 34606

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8. The above the obliga	named entity submits this statement for the purpo tions of registered agent.	ose of changing its registere	d office or registered agent, or both, in the	e State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and fife if applicable (NOTE Registered Agent signature required when restricting). DATE				
F.	iling Fee is \$50.00 ue by May 1, 2006	THOSE HOUSE	with a city of the contract of the contract (Activity))	DATE
9.	MANAGING MEMBERS/MANA	GERS		
THILE NAME STIRLET ADDITIESS CHTY-ST-ZIP	MGR MILLER, REBERTA A 13433 CHAMBORD STREET BROOKSVILLE, FL 34613		04	U00000490061 /18/06-80038-019 50.00
NAME STREET ADDRESS CITY-ST-ZIP	1			
Title Name Street Address City-S1-Zip			DO NO	OT WRITE
Title Name Street Address City-St-Zip			IN THI	S SPACE
TITLE NAME SIRELT ADDRESS CITY-ST-ZIP				!
DTLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby of indicated limited tial.	entify that the information supplied with this litting on this report is true and accurate and that my signific company or the receiver or trustee ampower	does not qualify for the exe gnature shall have the same ad to execute this report as	mptions contained in Chapter 119, Florid a legal effect as if made under cath; that required by Chapter 608, Florida Statute	a Statutes. I further certify that the information I am a managing member or manager of the ss.

REBERTA MILLER

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