2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

Feb 16, 2007 08:00 All Secretary of State DOCUMENT # L03000048742 CC'S SOLID SURFACE, LLC Principal Place of Business Mailing Address 13433 CHAMBORD STREET 13433 CHAMBORD STREET BROOKSVILLE, FL 34606 US BROOKSVILLE, FL 34606 US 02052007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0450168 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GIOVINCO, IAN DO NOT WRITE 7215 HIAWATHA PARKWAY SPRING HILL, FL 34606 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 algosture required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9. MGR TITLE MILLER, REBERTA A NAME 13433 CHAMBORD STREET STREET ADDRESS CITY-ST-ZIP BROOKSVILLE, FL 34613 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS TO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 technique or trustee empowered to execute this report as required by Chapter 608. Florida Statutes.

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

STREET ADDRESS CITY-ST-ZIP

× 2-14-67

257-5925364

Date

Daytime Phone #

FILED