

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 19, 2008 8:00 am**  
**Secretary of State**

03-19-2008 90147 045 \*\*\*138.75

**DOCUMENT # L03000054852**

1. Entity Name  
DESIGN TILE SETTING, LLC.



Principal Place of Business  
29722 MORWEN PLACE  
WESLEY CHAPEL, FL 33543 US

Mailing Address  
29722 MORWEN PLACE  
WESLEY CHAPEL, FL 33543 US

**60015756**



03032008 Chg-LLC CR2E083 (12/06)

4. FEI Number  
**90-0138166**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

UZUNOGLU, ZAFER  
29722 MORWEN PLACE  
WESLEY CHAPEL, FL 33543

**7. Name and Address of New Registered Agent**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City  
**FL** Zip Code

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 reinstating)

DATE

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

**Make check payable to**  
**Florida Department of State**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

MGRM  
UZUNOGLU, ZAFER  
29722 MORWEN PLACE  
WESLEY CHAPEL, FL 33543

☐ Delete

TITLE  
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**10. ADDITIONS/CHANGES**

TITLE  
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STREET ADDRESS  
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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:**

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

Date

Daytime Phone #

**3-8-2008-813-9079445**