

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90037 030 ****55.00

DOCUMENT # L04000001773

1. Entity Name

DANIELS TILE INSTALLATION LLC



Principal Place of Business

955 53RD ST.-E
APT. 814
BRADENTON FL 34208

Mailing Address

955 53RD ST.-E
APT. 814
BRADENTON FL 34208



2. Principal Place of Business

619 23rd ST E
Suite, Apt. #, etc.
Bradenton FL
City & State
34208 USA
Zip Country

3. Mailing Address

619 23rd ST E
Suite, Apt. #, etc.
Bradenton, FL
City & State
34208 USA
Zip Country

1st MOORE

CR2E083 (10/05)

4. FEI Number

90-0133298

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

DELEON, DANIEL G
2625 3RD ST. E.
BRADENTON FL 34208

7. Name and Address of New Registered Agent

Name Daniel Deleon
Street Address (P.O. Box Number is Not Acceptable)
619 23rd St. E
Bradenton, FL 34208
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]
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/23/06
DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Florida Department of State.
Due By May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DELEON, DANIEL G 2625 3RD ST. E. BRADENTON FL 34208	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JENKINS, KENNETH J 2625 3RD ST. E. BRADENTON FL 34208	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DELCON, EDGAR 1808 9TH AVE. E. BRADENTON FL 34208	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Daniel Deleon 619 23rd St E Bradenton, FL 34208	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	not a managing member Kenneth Jenkins 619 23rd St E Bradenton, FL 34208	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR EDGAR DELEON 2625 3rd St E Bradenton, FL 34208	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> Addition
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 Section 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 #

4/23/06