

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000058614

FILED  
Feb 28, 2009  
Secretary of State

Entity Name: NO EXCUSE TILE REPAIR, LLC

## Current Principal Place of Business:

6018 WEST FERN STREET  
TAMPA, FL 33634 US

## New Principal Place of Business:

## Current Mailing Address:

14064 BANYAN ROAD  
SPRINGHILL, FL 34609 US

## New Mailing Address:

1327 LORETTO CIRCLE  
ODESSA, FL 33556 US

FEI Number: 20-1479746

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LINARES, DAPHNE L  
14064 BANYAN ROAD  
SPRING HILL, FL 34609 US

## Name and Address of New Registered Agent:

ERIC ROBERT LINARES  
1327 LORETTO CIRCLE  
ODESSA, FL 33556 US

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.

SIGNATURE: ERIC ROBERT LINARES

02/28/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: LINARES, ERIC R  
Address: 14064 BANYAN ROAD  
City-St-Zip: SPRINGHILL, FL 34609 US

Title: MGRM (X) Delete  
Name: LINARES, DAPHNE L  
Address: 14064 BANYAN ROAD  
City-St-Zip: SPRING HILL, FL 34609

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: ERIC R. LINARES,  
Address: 1327 LORETTO CIRCLE  
City-St-Zip: ODESSA, FL 33556 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ERIC ROBERT LINARES

PRES

02/28/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date