

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 09, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000018768**

**1. Entity Name**  
**JOE LOGOZO TILE SERVICES LLC**



**Principal Place of Business**  
**10053 DIAMOND LAKE DRIVE**  
**BOYNTON BEACH, FL 33437**

**Mailing Address**  
**10053 DIAMOND LAKE DRIVE**  
**BOYNTON BEACH, FL 33437**

**DO NOT WRITE IN THIS SPACE**



04152008 No Chg-LLC

CR2E083 (12/07)

**4. FEI Number**  
**20-2452040**

**Applied For**  
**Not Applicable**

**5. Certificate of Status Desired** ☐

**\$5.00 Additional**  
**Fee Required**

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

**SPIEGEL & UTRERA, P.A.**  
**1840 SW 22ND ST.**  
**4TH FLOOR**  
**MIAMI, FL 33145**

**DO NOT WRITE  
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 signature required when reinstating)

DATE

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

000000850755  
06/04/08-80004-005 138.75

**9. MANAGING MEMBERS/MANAGERS**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**  
**MGR**  
**LOGOZO, JOSEPH**  
**10053 DIAMOND LAKE DRIVE**  
**BOYNTON BEACH, FL 33437**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

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**NAME**  
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**CITY-ST-ZIP**

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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:** **JOSEPH LOGOZO**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**4/21/08**  
Date

**561-752-2470**  
Daytime Phone #