

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000038190

Entity Name: D'ULTIMATE IN TILE, LLC

FILED
Mar 06, 2006
Secretary of State

Current Principal Place of Business:

1800 NW 59 TERR
SUNRISE, FL 33313

New Principal Place of Business:

5804 NW 14TH STREET
SUNRISE, FL 33313

Current Mailing Address:

1800 NW 59 TERR
SUNRISE, FL 33313

New Mailing Address:

5804 NW 14TH STREET
SUNRISE, FL 33313

FEI Number: 43-2080209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GARDNER, AINSWORTH
1800 NW 59TH TERR.
SUNRISE, FL 33313 US

Name and Address of New Registered Agent:

GARDNER, AINSWORTH
5804 NW 14TH STREET
SUNRISE, FL 33313 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: AINSWORTH GARDNER

03/06/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: GARDNER, AINSWORTH
Address: 1800 NW 59TH TERR
City-St-Zip: SUNRISE, FL 33313

Title: VP () Delete
Name: VELEZ, GEORGETTE
Address: 1800 NW 59TH TERR
City-St-Zip: SUNRISE, FL 33313

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: GARDNER, AINSWORTH
Address: 5804 NW 14TH STREET
City-St-Zip: SUNRISE, FL 33313

Title: VP (X) Change () Addition
Name: VELEZ, GEORGETTE
Address: 5804 NW 14TH STREET
City-St-Zip: SUNRISE, FL 33313

I hereby certify that the information supplied with this filing does not qualify for the 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: AINSWORTH GARDNER

PRES

03/06/2006

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