

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

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Jan 12, 2006 8:00 am
Secretary of State

01-12-2006 90038 015 ****50.00

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01072006 Chg-LLC CR2E083 (11/05)

DOCUMENT # L05000064636 1. Entity Name TOM TILE, LLC					
Principal Place of Business 6316 B SUNSET AVE PANAMA CITY, FL 32408 US			Mailing Address 6316 B SUNSET AVE PANAMA CITY, FL 32408 US		
2. Principal Place of Business 1205 Hunt Club Circle Suite, Apt. #, etc.		3. Mailing Address 1205 Hunt Club Circle Suite, Apt. #, etc.			
City & State Panama City Beach, FL Zip 32407		City & State Panama City Beach, FL Zip 32407		4. FEI Number 84-1683283	
Country Bay		Country Bay		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				6. Name and Address of Current Registered Agent TUZHANSKIY, OLEG 6316 B SUNSET AVE PANAMA CITY, FL 32408	
7. Name and Address of New Registered Agent Name TUZHANSKIY, OLEG Street Address (P.O. Box Number is Not Acceptable) 1205 Hunt Club Circle City Panama City Beach FL Zip Code 32407				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 01.09.06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>	
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TUZHANSKIY, OLEG <input type="checkbox"/> Delete 6316 B SUNSET AVE PANAMA CITY, FL 32408		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition TUZHANSKIY, OLEG 1205 Hunt Club Circle Panama City Beach, FL 32407	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		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"/> Delete		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"/> Delete		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"/> Delete		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 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: Oleg Tuzhanskiy <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			01.09.06 (850) 890-1188 <small>Date Daytime Phone #</small>		