


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT (AR)**

**FILED**  
**May 30, 2006 8:00 am**  
**Secretary of State**

05-30-2006 90183 029 \*\*\*\*50.00

<b>DOCUMENT # L05000073349</b> 1. Entity Name <b>J &amp; L TILE, LLC</b>																																																																																
Principal Place of Business <b>16036 KATHY LN YOUNGSTOWN FL 32466 US</b>			Mailing Address <b>16036 KATHY LN YOUNGSTOWN FL 32466 US</b>																																																																													
2. Principal Place of Business Suite, Apt. #, etc. <b>151 COYOTE PASS #24</b> City & State <b>PANAMA CITY BEACH, FL</b> Zip <b>32407</b>		3. Mailing Address Suite, Apt. #, etc. <b>P.O. BOX 20481</b> City & State <b>PANAMA CITY BEACH, FL</b> Zip <b>32417</b>																																																																														
Country <b>USA</b>		Country <b>USA</b>		4. FEI Number <b>870750743</b>																																																																												
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required																																																																														
6. Name and Address of Current Registered Agent  <b>WERNER, JIRI 16036 KATHY LN YOUNGSTOWN FL 32466</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>																																																																													
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: <u>Jiri Werner</u> (NOTE: Registered Agent signature required when reinstating) DATE: <u>04/08/06</u>																																																																																
<b>FILE NOW!!! FEE IS \$50.00</b> <b>Make Check Payable to Florida Department of State</b> <b>Due By May 1, 2006</b>																																																																																
<div style="display: flex;"> <div style="flex: 1;"> <b>9. MANAGING MEMBERS/MANAGERS</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">MGRM</td> <td style="width: 30%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>WERNER, JIRI</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>16036 KATHY LN</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>YOUNGSTOWN FL 32466</td> <td></td> </tr> <tr><td colspan="3"> </td></tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr><td colspan="3"> </td></tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr><td colspan="3"> </td></tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr><td colspan="3"> </td></tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr><td colspan="3"> </td></tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr><td colspan="3"> </td></tr> </table> </div> <div style="flex: 1;"> <b>10. ADDITIONS / CHANGES</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;"></td> <td style="width: 30%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr><td colspan="3"> </td></tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr><td colspan="3"> </td></tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr><td colspan="3"> </td></tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr><td colspan="3"> </td></tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr><td colspan="3"> </td></tr> </table> </div> </div>						TITLE	MGRM	<input type="checkbox"/> Delete	NAME	WERNER, JIRI		STREET ADDRESS	16036 KATHY LN		CITY - ST - ZIP	YOUNGSTOWN FL 32466					TITLE		<input type="checkbox"/> Delete				TITLE		<input type="checkbox"/> Delete				TITLE		<input type="checkbox"/> Delete				TITLE		<input type="checkbox"/> Delete				TITLE		<input type="checkbox"/> Delete				TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition				TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition				TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition				TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition				TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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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: <u>Jiri Werner</u> <u>JIRI WERNER</u> <u>04/08/06</u> <u>850-218-1178</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>																																																																																