



2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90039 038 *****50.00

DOCUMENT # L05000122416 1. Entity Name QUALITY ASSURED TILE & MARBLE L.L.C.					
Principal Place of Business 500 SUMMIT DRIVE SEBRING, FL 33870			Mailing Address 500 SUMMIT DRIVE SEBRING, FL 33870		
2. Principal Place of Business - No P.O. Box # 1960 N. Carmel Rd Suite, Apt. #, etc.		3. Mailing Address 1960 N. Carmel Rd Suite, Apt. #, etc.			
City & State Avon Park, FL		City & State Avon Park, FL		4. FEI Number 20-4075407	
Zip 33825		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent SOMMERFIELD, GREGORY 500 SUMMIT DRIVE SEBRING, FL 33870			7. Name and Address of New Registered Agent Name Gregory Sommerfield Street Address (P.O. Box Number is Not Acceptable) 1960 N Carmel Rd City Avon Park FL Zip Code 33825		
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM SOMMERFIELD, GREGORY 500 SUMMIT DRIVE SEBRING, FL 33870	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	m GRM Sommerfield, Gregory 1960 N. Carmel Rd Avon Park, FL 33825	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM SOMMERFIELD, ALLISON 3870 2ND AVE. S.E. NAPLES, FL 34117	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	m GRM Sommerfield, Allison 1960 N. Carmel Rd Avon Park, FL 33825	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<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 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:  Greg Sommerfield 4112107(863)453-8453 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					