

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000019667

FILED
Mar 23, 2007
Secretary of State

Entity Name: BEST FLORIDA MARBLE LLC

Current Principal Place of Business:

2534 EDISON AVE
FT MYERS, FL 33901

New Principal Place of Business:

2547 WILLARD AVE
FT MYERS, FL 33901

Current Mailing Address:

7510 OMNI LANE APT 202
FORT MYERS, FL 33905

New Mailing Address:

FEI Number: 20-4354384 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JEAN-MICHEL, AUGUTIN
7510 OMNI LANE APT 202
FORT MYERS, FL 33905 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MAXENE, AUGUSTIN
Address: 3748 METRO PKW APT 911
City-St-Zip: FORT MYERS, FL 33916

Title: MGR () Delete
Name: RONIQUÉ, MINELOR
Address: PO BOX 9842
City-St-Zip: NAPLES, FL 34102

Title: MGR () Delete
Name: FRITZ, AUGUSTIN
Address: 105-80 CLEAR LAKES LOOP APT 171
City-St-Zip: FORT MYERS, FL 33908

Title: MGR () Delete
Name: JEAN-MICHEL, AUGUSTIN
Address: 7510 OMNI LANE APT 202
City-St-Zip: FORT MYERS, FL 33905

Title: MGR () Delete
Name: ROGER, GEDEON
Address: 106 EASY STREET
City-St-Zip: KINGSLAND, GA 31548

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: RUBEN, LOUIMA
Address: 3746 METRO PKW APT 911
City-St-Zip: FORT MYERS, FL 33911

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MAXENE AUGUSTIN

MGR

03/23/2007

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