

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000025781

FILED
Apr 28, 2007
Secretary of State

Entity Name: INTEGRAL GRANITE & KITCHENS L.L.C.

Current Principal Place of Business:

17420 NORTH HIGHWAY 41, SUITE 110
LUTZ, FL 33549

New Principal Place of Business:

Current Mailing Address:

17420 NORTH HIGHWAY 41, SUITE 110
LUTZ, FL 33549

New Mailing Address:

1331 LEEWARD AVE
SPRING HILL, FL 34606

FEI Number: 20-4540158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

PESTANA, HUGO D
1331 LEEWARD AVE
SPRING HILL, FL 34606 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: HUGO D. PESTANA

04/28/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PRESTANA, HUGO D
Address: 17420 NORTH HIGHWAY 41, SUITE 110
City-St-Zip: LUTZ, FL 33549

Title: ST () Delete
Name: PRESTANA, HUGO D
Address: 17420 NORTH HIGHWAY 41, SUITE 110
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PRESTANA, HUGO D
Address: 17420 NORTH HIGHWAY 41, SUITE 110
City-St-Zip: LUTZ, FL 33549

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

I hereby certify that the information supplied with this filing does not qualify 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: HUGO D. PESTANA

MGMR

04/28/2007

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