

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000114683

FILED
Apr 27, 2009
Secretary of State

Entity Name: FLORIDA MARBLE & GRANITE,"LLC"

Current Principal Place of Business:

1001 NE 45TH STREET
OAKLAND PARK, FL 33334

New Principal Place of Business:

Current Mailing Address:

1001 NE 45TH STREET
OAKLAND PARK, FL 33334

New Mailing Address:

FEI Number: 20-5966262

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKOULARICOS, CHARM N
5770 NE 18TH AVENUE
FORT LAUDERDALE, FL 33334 US

Name and Address of New Registered Agent:

SKOULARICOS, CHARM N
1001 NE 45TH STREET
OAKLAND PARK, FL 33334 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: CHARM SKOULARICOS

04/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: SKOULARICOS, CHARM N
Address: 1001 NE 45TH STREET
City-St-Zip: OAKLAND PARK, FL 33334

Title: MGR (X) Delete
Name: SKOULARICOS, CHRIS
Address: 1001 NE 45TH STREET
City-St-Zip: OAKLAND PARK, FL 33334

Title: SEC () Delete
Name: CRIBBS, LILLIE C
Address: 1001 NE 45TH STREET
City-St-Zip: OAKLAND PARK, FL 33334

ADDITIONS/CHANGES:

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 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: CHARM SKOULARICOS

PRES

04/27/2009

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