2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000079409

TILES SOUTHEAST INC,

CORAL GABLES, FL 33134

1000 PONCE DE LEON BLVD., SUITE 120

Name:

Address:

City-St-Zip:

Entity Name: PLATINUM BUSINESS CENTER, LLC

FILED Apr 12, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
1000 PON CORAL G	ICE DE LEON ABLES, FL 33	BLVD., SUITE 120 134		
Current Mailing Address:			New Mailing Address:	
	ICE DE LEON ABLES, FL 33	BLVD., SUITE 120 134		
FEI Number	: 26-0845308	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
VIDAL, FE 701 SW 2' MIAMI, FL	7 AVENUE, SL	JITE #606		
	e named entity e of Florida.	submits this statement for the	purpose of changing its register	red office or registered agent, or both
SIGNATU	RE:			
	Electror	nic Signature of Registered Ag	ent	Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	JASAL GROUP	E LEON BLVD., SUITE 120	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	ASESORIA OR	E LEON BLVD., SUITE 120	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SALGINO INVE	Delete STMENTS, LLC DE LEON BLVD., SUITE 120 SS, FL 33134	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	CALTEC OVER	E LEON BLVD., SUITE 120	Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	MGR () Delete	Title:	() Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ARMANDO A JAVIER MGR 04/12/2008