

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000043085

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** THE FACTORY TILE & KITCHENS, LLC

**Current Principal Place of Business:**

992 N. SEMORAN BLVD,  
SUITE B  
ORLANDO, FLORIDA, 32807

**New Principal Place of Business:**

992 N. SEMORAN BLVD,  
SUITE B  
ORLANDO, FLORIDA, FL 32807

**Current Mailing Address:**

992 N. SEMORAN BLVD,  
SUITE B  
ORLANDO, FLORIDA, 32807

**New Mailing Address:**

992 N. SEMORAN BLVD,  
SUITE B  
ORLANDO, FLORIDA, FL 32807

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DIAZ, WILLIAM J  
992 N. SEMORAN BLVD  
SUITE B  
ORLANDO,, FL 32807 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  
Name: DIAZ, WILLIAM J  
Address: 992 N SEMORAN BLVD  
City-St-Zip: ORLANDO, FL 32807

I hereby 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: WILLIAM DIAZ

MGR

04/30/2011

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