

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 14, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # L98000001618**

1. Entity Name  
**TITAN STONE, TILE & MASONRY OF FLORIDA, L.L.C.**



Principal Place of Business  
**730 NW 7TH STREET  
FORT LAUDERDALE, FL 33311**

Mailing Address  
**730 NW 7TH STREET  
FORT LAUDERDALE, FL 33311**



01082008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0866051**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**BLAIR, JAMES  
730 NW 7TH STREET  
FORT LAUDERDALE, FL 33311**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

000000781858  
01/15/08-80051-019 138.75

**9. MANAGING MEMBERS/MANAGERS**

TITLE: MGR  
NAME: FARINA, JOSEPH L  
STREET ADDRESS: 730 NW 7TH STREET  
CITY- ST- ZIP: FORT LAUDERDALE, FL 33311

TITLE: MGR  
NAME: BLAIR, JAMES  
STREET ADDRESS: 730 NW 7TH STREET  
CITY- ST- ZIP: FORT LAUDERDALE, FL 33311

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CITY- ST- ZIP:

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 606, Florida Statutes.

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**JAMES BLAIR**

**1/8/08**

Date

**934-316-0272**

Daytime Phone #