FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2003 8:00 am
Secretary of State
03-12-2003 90085 034 ***150.00

DOCUMENT # F96897

1. Entity Name
EMPIRE MARBLE CO. INC.

70026851

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business	3. Mailing Address
11750 Phillips Hwy Suite, Apt. #, etc.	11750 Phillips Hwy Suite, Apt. #, etc.
City & State: JAX FL.	City & State: JAX. FL.
Zip: 32256 Country: USA	Zip: 32256 Country: USA

4. FEI Number: 592275199 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: WAYNE MORRIS

Street Address (P.O. Box Number is Not Acceptable): 3594 EDS COURT

City: GCS **FL** Zip Code: 32043

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: Wayne Morris DATE: 3-10-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MORRIS, WAYNE
STREET ADDRESS	3594 EDS COURT
CITY-ST-ZIP	GCS FL. 32043
TITLE	VP
NAME	MORRIS, ANDREW
STREET ADDRESS	11750 PHILLIPS Hwy
CITY-ST-ZIP	JAX FL 32258
TITLE	ST
NAME	MIKE D. WELSH JR
STREET ADDRESS	4117 SECENIC DR
CITY-ST-ZIP	MCCLENNY FL 32068
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CR2E034B (12/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Wayne Morris DATE: 3/10/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #