2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jun 07, 2004 8:00 am **Secretary of State** DOCUMENT # P00000035628 1. Entity Name 06-07-2004 90006 004 ***150.00 CRUZ MARBLE & GRANITE, CORPORATION Principal Place of Business Mailing Address 1660 W 32nd Place 1660 W 32nd Place 14023454 Hialeah, FL 33012 Hialeah, FL 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 65-1010338 Not Applicable Ζiρ Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CRUZ, PABLO Street Address (P.O. Box Number is Not Acceptable) 5451 West 9th Avenue Hialeah, FL 33012 Zip Code ' City 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 little if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE Cruz, Pablo 5451 West 9th Avenue <u>Hialeah, FL 33012</u> NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change Change Delete DIRE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 Block 11 if changed, or on an attaching twith an address, with all other like empowered.

FILED

Date

Daytime Phone

Alfachment

14023454

June 1, 2004, 2004

Florida Department of State Division of Corporations P O Box 6327 Tallahassee, Florida 32399

Ref. P00000035628

Dear Sir,

Please take this letter as a format request to abate penalty for not filing the transform Business Report before May 1st, 2004 due to the following reasons:

First:

We never received the original report before the deadline to file

such report due to the fact that We did not receive the report.

Second:

Attached to this letter you will find a Uniform Business Report for

2004. Also, you will find a corporate check for the amount of US \$

150.00 covering the filing fee for the year 2004.

Should you any additional information please call Mr. Helio Palacios

at 305-554-7737 during business hours.

Sincerely,

CRUZ MARBLE & GRANITE, CORPORATION

PABLO CRU

President