

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000035275

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

**Entity Name:** WHOLESALE MARBLE AND GRANITE TOPS, INC.

**Current Principal Place of Business:**

4900 LYONS TECHNOLOGY PARKWAY  
SUITE 7  
COCONUT CREEK, FL 33073 US

**New Principal Place of Business:**

**Current Mailing Address:**

4900 LYONS TECHNOLOGY PARKWAY  
SUITE 7  
COCONUT CREEK, FL 33073 US

**New Mailing Address:**

**FEI Number:** 02-0570743

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LUCCI, MICHAEL C DPS  
4900 LYONS TECHNOLOGY PARKWAY  
COCONUT CREEK, FL 33073 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

**OFFICERS AND DIRECTORS:**

Title: DPS  
Name: LUCCI, MICHAEL C DPS  
Address: 4900 LYONS TECHNOLOGY PARKWAY SUITE 7  
City-St-Zip: COCONUT CREEK, FL 33073 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL LUCCI

DPS

04/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date