


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 14, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000021850

1. Entity Name
DECO GRANITE & MARBLE COUNTERTOPS, INC.



Principal Place of Business
**2103 SOUTHWEST 59TH TERRACE
HOLLYWOOD, FL 33023**

Mailing Address
**10299 BOYNTON PLACE CIRCLE
BOYNTON BEACH, FL 33437**

DO NOT WRITE IN THIS SPACE



03112008 No Chg-P CR2E034 (11/05)

4. FEI Number 38-3678855	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BACILA, MOISE
10299 BOYNTON PLACE CIRCLE
BOYNTON BEACH, FL 33437**

**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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

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

U000000857757
04/01/08-80017-014 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BACILA, MOISE 2103 SOUTHWEST 59TH TERRACE HOLLYWOOD, FL 33023
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BONA, VASILE 2103 SOUTHWEST 59TH TERRACE HOLLYWOOD, FL 33023
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BACILA, CRUCITA 2103 SOUTHWEST 59TH TERRACE HOLLYWOOD, FL 33023
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. 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 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 attachment with an address, with all other like empowered

SIGNATURE: *Moise Bacila* **MOISE BACILA** 03-11-2008 (954)931-6256
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #