

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000086313

FILED
Apr 30, 2005
Secretary of State

Entity Name: SW MARBLE, INC.

Current Principal Place of Business:

901 MADES DRIVE
#H-901
FORT PIERCE, FL 34947 US

New Principal Place of Business:

814 EVERNIA STREET
SEBASTIAN, FL 32958 US

Current Mailing Address:

901 MADES DRIVE
#H-901
FORT PIERCE, FL 34947 US

New Mailing Address:

814 EVERNIA STREET
SEBASTIAN, FL 32958 US

FEI Number: 20-0133264

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVES NETO, SEBASTIAO
901 MADES DRIVE
#H-901
FORT PIERCE, FL 34947 US

Name and Address of New Registered Agent:

ALVES NETO, SEBASTIAO
814 EVERNIA STREET
SEBASTIAN, FL 32958 US

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: SEBASTIAO ALVES NETO

04/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALVES NETO, SEBASTIAO
Address: 901 MADES DRIVE#H-901
City-St-Zip: FORT PIERCE, FL 34947 US

Title: VD () Delete
Name: RODRIGUES, VANDERLEI D
Address: 901 MADES DRIVE#H-901
City-St-Zip: FORT PIERCE, FL 34947 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALVES NETO, SEBASTIAO
Address: 814 EVERNIA STREET
City-St-Zip: SEBASTIAN, FL 32958 US

Title: VD (X) Change () Addition
Name: RODRIGUES, VANDERLEI D
Address: 814 EVERNIA STREET
City-St-Zip: SEBASTIAN, FL 32958 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: SEBASTIAO ALVES NETO

P

04/30/2005

Electronic Signature of Signing Officer or Director

Date