

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**APPROVED  
AND  
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**95 APR 26 AM 10:16**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**CORPORATION  
ANNUAL REPORT  
1995**



**FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS**

**DOCUMENT # P92000011794 (4)**

**1. Corporation Name  
AUSSEM MARBLE AND GRANITE, INC.**

DO NOT WRITE IN THIS SPACE.

**Principal Place of Business Mailing Address  
3080 DOBBS RD., #C ST. AUGUSTINE FL 32086**

**3. Date Incorporated or Qualified 12/15/1992  
3a. Date of Last Report 10/12/1994**

**2. Principal Place of Business 2060 DOBBS RD. ST. AUGUSTINE FL  
21. Mailing Address 26. Suite, Apt. #, etc. 3AME**

**4. FEI Number 59-3157167  
Applied For Not Applicable**

**22. City & State 23. City & State**

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

**24. Zip 32096 25. Country USA 29. Zip 30. Country**

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

**8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No**

**9. Name and Address of Current Registered Agent  
AUSSEM, STEPHEN  
1609 SAN JOSE FOREST CT.  
ST. AUGUSTINE FL 32084**

**10. Name and Address of New Registered Agent  
81 Name 3AME  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code**

**11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.**

**SIGNATURE X [Signature] April 20, 1995 DATE**

**12. OFFICERS AND DIRECTORS**

TITLE	D
NAME	AUSSEM, STEPHEN G
STREET ADDRESS	1609 SAN JOSE FOREST CT.
CITY - ST - ZIP	ST. AUGUSTINE FL 32084
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1 2 NAME	
1 3 STREET ADDRESS	
1 4 CITY - ST - ZIP	
2 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2 2 NAME	
2 3 STREET ADDRESS	
2 4 CITY - ST - ZIP	
3 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3 2 NAME	
3 3 STREET ADDRESS	
3 4 CITY - ST - ZIP	
4 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4 2 NAME	
4 3 STREET ADDRESS	
4 4 CITY - ST - ZIP	
5 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5 2 NAME	
5 3 STREET ADDRESS	
5 4 CITY - ST - ZIP	
6 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6 2 NAME	
6 3 STREET ADDRESS	
6 4 CITY - ST - ZIP	

**14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.**

**SIGNATURE: X [Signature] SIGNATURE AND SIGNED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**April 20, 1995 DATE**  
(904) 461-0011  
(904) 461-9638  
(904) 826-0021