# UNIFORM BUSINESS REPORT (UBR)

**FILED**
**May 12, 2000 8:00**
**Secretary of State**
05-12-2000 90032 026 ***150.00

DOCUMENT # V39909

Name
G MARBLE INC.

| Place of Business | Mailing Address |
|---|---|
| STREET NORTH<br>FL 33470 | 18604 49TH STREET NORTH<br>LOXAHATCHEE FL 33470-2350<br>US |

731604

DO NOT WRITE IN THIS SPACE

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| Apt. #, etc. | Suite, Apt. #, etc. |
| State | City & State |
| Country / Zip / Country | |

4. FEI Number 65-0334424 ☐ Applied For ☐ Not Applicable

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

| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent |
|---|---|
| MCGEENEY, THOMAS JR.<br>18604 49TH STREET NORTH<br>LOXAHATCHEE FL 33470 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City **FL** Zip Code |

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

The corporation is eligible to satisfy its Intangible Tax requirement and elects to do so. (Fields on back) ☐

**FILE NOW!!! FEE IS $150.00**
**After MAY 1, 2000 Fee will be $550.00**
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

| OFFICERS AND DIRECTORS | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |
|---|---|
| PD<br>MCGEENEY, THOMAS J JR.<br>18604 49TH STREET NORTH<br>LOXAHATCHEE FL 33470 ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition |
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CR2E034 (9/99)

I 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Thomas McGeeney Jr. Thomas McGeeney JR 4/27/00 561-791-2591
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #