2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 358440

FILED Jan 09, 2009 Secretary of State

Entity Name: PREMIX-MARBLETITE MANUFACTURING CO.

Current Principal Place of Business: New Principal Place of Business:

1259 NW 21ST ST. 1259 NW 21ST ST.

POMPANO BCH, FL 33069 POMPANO BCH, FL 33069 US

Current Mailing Address: New Mailing Address:

3790 PARK CENTRAL BLVD. NORTH 3790 PARK CENTRAL BLVD. NORTH POMPANO BCH, FL 33064 POMPANO BCH, FL 330642225 US US

FEI Number: 59-1281165 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

EHLER, HOWARD JR 3790 PÁRK CENTRAL BLVD. NORTH

EHLER, HOWARD JR 3790 PARK CENTRAL BLVD. NORTH POMPANO BCH, FL 33064 POMPANO BEACH, FL 330642225 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: 01/09/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

HANSEN, FRED H HANSEN, FRED H Name: Name: 3739 N.W. MEDITERRANEAN LANE 3739 N.W. MEDITERRANEAN LANE

Address: Address: City-St-Zip: JENSEN BEACH, FL 34957 31 City-St-Zip: JENSEN BEACH, FL 34957 US

Title: SD Title: () Delete (X) Change () Addition EHLER, HOWARD L JR EHLER, HOWARD JR Name: Name:

5621 SW 8TH ST 5621 SW 8TH ST Address: Address: PLANTATION, FL 33317 PLANTATION, FL 33317 US City-St-Zip: City-St-Zip:

Title: **AVAS** Title: AVAS

(X) Change () Addition () Delete MURCHISON, BETTY J MURCHISON, BETTY J Name: Name:

2174 N. W. 75TH WAY 2174 N. W. 75TH WAY Address: Address:

City-St-Zip: PENBROKE PINES, FL 33024 City-St-Zip: PENBROKE PINES, FL 330241077 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: BETTY J MURCHISON **AVP** 01/09/2009