FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 539282

(4)

BEAUTY WITH MARBLE, INC.

FILED Jan 23 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 1591 N. POWERLINE ROAD 1591 N. POWERLINE ROAD POMPANO BEACH FL 33069-8620 POMPANO BEACH FL 33069-								
					3. Date Incorporated or Qualified 07/13/1977	3a, Date of La		
2. Principal Pla	ace of Business	2a. Mailing Addres	ss		4. FEI Number		Applied For	
21		26			59-1751122		Not Applicable	
Suite, Apt. (22	#, etc.	Suite Apt, #. e	to.		5. Certificate of Status Desired	1 1 7	75 Additional e Required	
City & State		City & State			Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees	
Z-p	Country	Zip	Cour	try	B. This corporation has liability for i		Jer s. 199.032,	
24	25	[29]	30			Yes No		
T	9. Name and Address of Curr	ent Hegisterea Agent		31 Name	10. Name and Address of New Re Bartolo Traina	gistered Agent		
	NA, JOSEPHINE							
4521 N.E. 13 AVENUE OAKLAND PARK FL				552	ddress (P.O. Box Number is Not Acceptable) 25 N W 57th Way			
}				33				
			ļ	Cora	al Springs	FL 85	Zip Code 33067	
11, Pursuant to office or re agent. Lar SIGNATURE	o the provisions of Sections 607.0 ngistered agent, or both, in the Stein facultar with and occupatine oblined to the section of the section	ite of Florida. Such chang ligations of, Section 607.0!	e was authorized 505, Florida Statu	by the corporal tes.	poration submits this statement for the pation's board of directors. I hereby accepted the part of the	ot the appointmer	ng its registered it as registered	
12.		AND DIRECTORS	(NOTE REGISTERED	Agent signature requi	ADDITIONS/CHANGES TO OFFICE		TORS IN 12	
TOLE	DP	TT DELL		F I	ADDITIONO/OFFICINGED TO OFFIC	Cha		
NAME	TRAINA, BARTOLO	_	1.2 NAM					
STREET ADORESS		525 NW 57th Wa	V 13 STR	EET ADDRESS			[8	
00Y-S1-7/2		oral Springs F		r-ST-ZIP			[6	
TITLE	SD	D beli	FTE 217H	E		☐ Cha	nge 🗌 Addition 🤇	
NAME	traina, Josephine		22 NAI	AE .				
STREET ADDRESS	4521 NE 13 AVENUE 5525	5 N W 57th Way	2.3 STF	EFT ADDRESS				
CITY+ST-ZIP	OAKLAND PARK FL COTS			Y-ST-ZIP				
JILTE	VP	DELI	31 TITU	E		L Cha	inge 🔲 Addition	
NAME	TRAINA, GENO A		3.2 NA	1			-	
STREET ADDRESS	228 S E 9TH AVE APT 3			EET ADDRESS				
THE	POMPANO BEACH FL	DELI		Y-ST-2IP		Cha	nge Addition	
NAME		[1A.()	4.1 III	1			ngs [] Addition	
STREET ADDRESS				EET ADORESS				
CITY - S1 - Z0°				r-ST-ZIP			ŀ	
Title		DELE				Cha	nge Addition	
NAME			52 NAI	Y				
STREET ADDRESS				EET ADDRESS				
C6 Y - S1 - 7/2				r-ST-ZIP				
TIFLE		☐ DELI				☐ Cha	inge 🔲 Addition	
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 S7F	EF1 ADDRESS				
COLY ST ZIF			6.4 CIT	Y-ST-ZIP				
1								

14. I do hereby 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 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 arr 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, a on an attachment with an address

Bartolo Traina