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

FILED May 06 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS **19**98 DOCUMENT # 649054 (4)INTERNATIONAL STONE & MARBLE, INC. Principal Place of Business Mailing Address 4304 SOUTH U.S. #1 4304 SOUTH U.S. #1 FORT PIERCE FL 34982 FORT PIERCE FL 34982 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/20/1979 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1961919 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Ζιρ Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Properly Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MOORE, WILLIAM U., JR. Street Address (P.O. Box Number is 4304 80UTH U.S. #1 82 FORT PIERCE FL 34982 83 84 City For Pierce 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 pulligations of, Section 607.0505, Florida Statutes. Moore 4-21-98 Betti SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE MOORE, WILLIAM U., JR. BETTY A. MOORE 4304 SOUTH U.S. #1 NAME 1.2 NAME 4304 SOUTH U.S. #1 STREET ADDRESS 1.3 STREET ADDRESS FT. PIERCE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE MOORE, BETTY A. 2.2 NAME 4304 SOUTH U.S. #1 STREET ADDRESS 2.3 STREET ADDRESS FT. PIERCE FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE MCCONKEY, MARY K. 3.2 NAME NAME 1523 S. JENKINS ROAD STREET ADDRESS 3.3 STREET ADDRESS FT. PIERCE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4 1 TITLE Change ☐ Addition NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP

14. Thereby 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 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 561

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS Change

21 90

Addition

DELETE

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP