

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90157 037 ****61.25

DOCUMENT # 720127

1. Entity Name
BROTHERHOOD OF MARBLE POLISHERS, INC.



Principal Place of Business
**75 N.E. 44TH STREET #48
FORT LAUDERDALE FL 33334
US**

Mailing Address
**75 N.E. 44TH STREET #48
FORT LAUDERDALE FL 33334
US**

60018214



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**GARBARINO, GEORGE
75 N.E. 44TH STREET
SUITE 48
FORT LAUDERDALE FL 33334**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VD** ☐ Delete
NAME **HERMAN, CHESTNUT**
STREET ADDRESS **1320 W 24 ST**
CITY-ST-ZIP **RIVIERA BEACH FL 33404**

TITLE **P.D.** ☒ Change ☐ Addition
NAME **HERMAN, CHESTNUT**
STREET ADDRESS **1320 W. 24 ST.**
CITY-ST-ZIP **RIVIERA BEACH FL. 33404**

TITLE **STD** ☐ Delete
NAME **GARBARINO, GEORGE**
STREET ADDRESS **27 W SUNRISE BLVD**
CITY-ST-ZIP **FT LAUD FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PD** ☒ Delete
NAME **HART, ENOS**
STREET ADDRESS **550 NW 5 ST APT 1104**
CITY-ST-ZIP **MIAMI FL**

TITLE **V.D** ☐ Change ☒ Addition
NAME **RONALD BOTHELLO**
STREET ADDRESS **4909 S.W. 43 TERR.**
CITY-ST-ZIP **FT. LAUD. FL 33314**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

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TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

GEORGE GARBARINO

(954) 492-5030

CR2E037 (10/02)