


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Sep 16, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # F02000000322</b> 1. Entity Name GLOBAL MARBLE & GRANITE, INC.	
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Principal Place of Business 130 WISTERIA DRIVE LONGWOOD, FL 32779	Mailing Address 130 WISTERIA DRIVE LONGWOOD, FL 32779
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**DO NOT WRITE IN THIS SPACE**



09142005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3537812	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MOORE, WILLIAM G  
130 WISTERIA DRIVE  
LONGWOOD, FL 32779

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 Due by October 1, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD MOORE, WILLIAM G 130 WISTERIA DRIVE LONGWOOD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MOORE, GERTRUDE K 130 WISTERIA DRIVE LONGWOOD, FL
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09/16/05-80001-016 150.00

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 607, 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: William G. Moore 09-14-05 4078622865  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #