2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 22, 2000 8:00 am Secretary of State **DOCUMENT # H19052** MARBLE CRAFT, INC. 03-22-2000 90061 046 ***150.00 Mailing Address Principal Place of Business 2929 BYROM STREET 2929 BYROM STREET MILTON FL 32570-3539 MILTON FL 32570 PARAPARA 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2452855 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MEISSNER, SCOTT R. Street Address (P.O. Box Number is Not Acceptable) 5450 OAKSHIRE RD MILTON FL 32570 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. **SIGNATURE** DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Addition VD TITLE Change TITLE ☐ Delete MEISSNER, GLORIA 7993 5. 4=110rT Rd. STREET ADDRESS STREET ADDRESS 268 S. AIRPORT ROAD CITY-ST-ZIP CITY-ST-ZIP MILTON FL ☐ Addition Change ☐ Delete TITI F TITLE MEISSNER, PAMELA NAME 7993 S. Airport Rd. NAME STREET ADDRESS STREET ADORESS 268 S. AIRPORT ROAD CITY-ST-ZIP CITY-ST-7IP MILTON FL **Change** ☐ Addition ☐ Defete TITLE TITLE MEISSNER, SCOTT R. NAME syso OAKshire Rd. NAME STREET ADDRESS 105 OAKSHIRE RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MILTON FL ☐ Delete TITI F Change ☐ Addition TITLE MEISSNER, PAMELA NAME NAME 7993 S. Airport Rd. STREET ADDRESS 268 S. AIRPORT ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MILTON FL ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITLE ☐ Addition NAME

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICE OR DIRECT

STREET ADDRESS

3/20/00

850-623-3509