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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K15758

L. T. MARBLE, INC.

SIGNATURE:

FILED Feb 17, 1999 8:00am **Secretary of State**

02-17-1999 90099 033 ***150.00



					'	A	K) 61611 1881
Principal Place	of Business	Mailing Address					
2030 NW 7TH AVE 2030 NW 7			N 7TH AVE				
MIAMI FL 33127		MIAMI FL 33127			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					02/23/1988		ł
					4. FEI Number	Ann	lied For
Principal Place of Business 2a. Mailing Address			288		Table Tabl	<u> </u>	Applicable .
:1		26		-	65-0034831	\$8.75 Ad	
Suite, Apt. #, etc. Suite, Apt. #, etc.			. .		5. Certificate of Status Desired	Fee Req	
27					i Figure 1	\$5.00 N	Any Do
City & State	•	City & State			6. Election Campaign Financing Trust Fund Contribution	Added to	
23		28	C=	ntn:			
Zip	Country	Žip	L— Con	nuy	8. This corporation owes the current year Inta	Yes [□No
24	25	29	30	Υ	Personal Property Tax. 10. Name and Address of New Registered A		
	9. Name and Address of Curre	nt Registered Agent		81 Name	10. Name and Address of New Registeres	.90,11	
					<u> </u>		
TRUJILLO, LEANDRO R.				82 Street A	ddress (P.O. Box Number is Not Acceptable)		{
2030 NW 7TH AVE						· · · · · · · · · · · · · · · · · · ·	**************************************
MIAMI FL 33127				83			
				84 City		85 Zip C	ode
					corporation submits this statement for the purpose of ration's board of directors. I hereby accept the appoin		
agent. I a	m familiar with, and accept the oblig-	ations of, Section Cor.	o, monda ota		quired when reinstating) DATE	· · · · · · · · · · · · · · · · · · ·	
	Signature, typed or printed name of registered age	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12
12.		DELE		ITLE		☐ Change	Addition
TITLE	PST Trujillo, Leandro R.	_	1.2 N	AME	•		1
NAME	AAAA ANA TTI ANT		13.5	TREET ADDRESS			Ì
STREET ADDRESS				TY-ST-ZIP			
CITY-ST-ZIP	MIAMI FL					☐ Change	☐ Addition
TITLE	D TOURS OF STANDOOD D	_		IAME			
NAME	TRUJILLO, LEANDRO R.			TREET ADDRESS			ļ
STREET ADDRESS				CITY-ST-ZIP			
CITY-ST-ZIP	MIAMI FL	☐ DELE				Change	☐ Addition
TITLE		_ 000		IAME			
NAME				TREET ADDRESS	,		,, l
STREET ADDRESS						1	
CITY-ST-ZIP		☐ DELI		CITY-ST-ZIP TITLE		☐ Change	¹ Addition
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NAME				STREET ADDRESS			Į
STREET ADDRESS							1
CITY-ST-ZIP		☐ DEL		TITLE		Change	Addition
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NAME	}	ė		STREET ADDRESS	The state of the s	ī	
STREET ADDRESS	3			CITY-ST-ZIP	• .		
CITY-ST-ZIP				TITLE		Change	Addition
TITLE	I .	☐ DEL		NAME			_
NAME							
STREET ADDRESS	6			STREET ADDRESS	,		
CITY-ST-ZIP			6.4	CITY-ST-ZIP	<u> </u>		-ftine

14. 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 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 address, with all other like empowered.