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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPAFITMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90134 030 \*\*\*150.00

## DOCUMENT # K16579 1. Corporation Name

SPACE COAST MARBLE, INC.

Principal Place of Business Mailing Address						
7738 INDUSTRIA	P.O. BOX 061664					
WEST MELBOU	RNE FL 32904		PALM BAY FL 32906-1664			DO NOT WRITE IN THIS SPACE
		US				3. Date Incorporated or Qualifed
						02/29/1988
2 Principal Pla	ace of Business	2a, Mailing Address			. — —	4. FEI Number Applied For
21			26			59-2879085 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23	28					Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country			This corporation owes the current year Intangible
24	25	29	30	0		Personal Property Tax. X Yes 1 No
	9. Name and Add ess of Curren	t Registered Agent				10. Name and Address of New Registere 1 Agent
51.10	ANI MEDANAD			81	Name	
	AN, W DAVID 5 W HIBISCUS BLVD #209	Ţ		82	Street Ad	dress (P.O. Box Number is Not Acceptable)
			83			
MCLI	BOURNE FL 32901					
				84	City	Fi 85 Zip Code
		1 003 4500 El-:1- Cl-b	1 - 4			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of (lirectors.) I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE						
				Agent	t signature requ	ired when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.		DELETE	13.	TI E	<del></del>	ADDITIONS/CHANGES TO OFFICERS AND BIRECTORS IN 12
TITLE	D Barker, John B.	LIOUELIE	- 1	1.2 NAME		
NAME			1		ADDDERG	
STREET ADDRESS	7738 INDUSTRIAL RD				ADDRESS	
CITY-ST-ZIP	W. MELBOURNE FL	☐ DELETE		1.4 CITY-ST-ZIP 2.1 TITLE		☐ Change ☐ Addition
TITLE	D DIAMA C		2.1 N			
NAME	BARKER, DIANA C.					
STREET ADDR :SS	7738 INDUSTRIAL RD W. MELBOURNE FL				ADDRESS	
CITY-ST-ZIP	W. MELDOURNE FL	DELETE	2.4 C	CITY-ST-ZIP		Change Addition
TITLE		□ DELL'IC	3.1 H			
NAME					ADDRESS	
STREET ADDRESS			•	3.3 STREET ADDRESS 3.4. CiTY-ST-ZiP		
CITY-ST-ZIP		□ DELETE	3.4. U		1-21	☐ Change ☐ Addition
TITLE		O#151E	4.1 MAME		(	
NAME					ADDRESS	į
STREET ADDRESS						
CITY-ST-ZIP		☐ DELETE		5.1 TITLE		☐ Change ☐ Addition
TITLE		ا الماران ال	5.1 RILE 5.2 NAME			
NAME	£22				ADDRESS	
STREET ADDF ESS			- 1	5.4 CITY-ST-ZIP		!
CITY-ST-ZIP				TITLE		☐ Change ☐ Addition
			6.2 NAME			<u></u>
NAME					ADDRESS	
STREET ADDI ESS				TY-SI	-	
CITY-ST-ZIP	die Alack the information of solid or	th this filing does not qualify for				n Section 119 (7(3)(i) Florida Statutes. I further certify that the information

I here by 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 signs ture 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 change d, or on an attachment with an address, with all other like empowered.

GNATURE:

SIGNATURE SIGNATURE NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

Daytime Phone #