

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **LO1000002774**

1. Entity Name

STERLING MARBLE & GRANITE, LLC

Principal Place of Business

**1951 HAMMONDSVILLE ROAD #4
POMPAHO BEACH FL 33069**

Mailing Address

**P.O. BOX 2106
POMPAHO BEACH FL 33061-2106**

2. Principal Place of Business

3. Mailing Address

PO Box 678

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**City & State
Vestal, NY**

Zip

Country

Zip

13851-0678

Country

USA

4. FEI Number

06-1609493

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ARTHUR C. KOSKI, P.A.
568 YAMATO ROAD #200
BOCA RATON FL 33431**

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.

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 \$50.00
Make Check Payable to Department of State
Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

MANAGERS

☐ Delete

10.

ADDITIONS/CHANGES

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

MGRM

Kirk D Ledbetter

2572 SE 13th Ct

Pompano Beach, FL 33062

☐ Change

☒ Addition

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

MGMR

Barry G Newman

3222 Cynthia Dr

Binghamton, NY 13903

☐ Change

☒ Addition

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

MGMR

Marc Newman

2020 E Hamton Rd

Binghamton, NY 13903

☐ Change

☒ Addition

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

MGMR

David Newman

110 Brochant Circle

Blue Bell, PA 19422

☐ Change

☒ Addition

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ Change

☐ Addition

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ Change

☐ Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Barry G Newman

(607)770-1010

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CP25083 (9/01)