## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000032510

Entity Name: MARBLECRAFT CARE LLC

FILED Aug 09, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 425 INDUSTRIAL STREET **UNIT A** LAKE WORTH, FL 33461 PΒ **Current Mailing Address: New Mailing Address:** 797 ILENE ROAD EAST WEST PALM BEACH, FL 33415 PB FEI Number: 20-0236858 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SERNA, GEIMY 425 INDUSTRIAL STREET **UNIT A** LAKE WORTH, FL 33461 US 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: Electronic Signature of Registered Agent Date **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** 

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition Name: SERNA. GEIMY Name:

 Address:
 797 ILENE ROAD EAST
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33415 PB
 City-St-Zip:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GIRALDO, JÚLIO C
 Name:

 Address:
 425 INDUSTRIAL STREET
 Address:

 City-St-Zip:
 LAKE WORTH, FL 33461 PB
 City-St-Zip:

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 Name:
 Name:
 GIRALDO, JOSE O

 Address:
 Address:
 425 INDUSTRIAL STREET

 City-St-Zip:
 City-St-Zip:
 LAKE WORHT, FL 33461 PB

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: GEIMY SERNA MGR 08/09/2004