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 # M75337

1. Corporation Name

OCEAN MARBLE INC.

Principal Place of Business	
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Mailing Address

FILED Mar 25, 1999 8:00 am Secretary of State

03-25-1999 90051 033 ***150.00



\$865 NW 74TH ST 9866 SW 28 5T MEDLEY FL 33186 HIAMT - FL 3316 US	6965 NW 74TH ST 980 MEDLEY FL-93166 417 US	665W.	28 TH ST 1_33/61	Date Incorporated or Qualifed 04/05/1988 FEI Number	Арр	lied For
21	26			65-0041892	Not	Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Ad Fee Red	
City & State	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 N Added to	
Zip Country 25	Zip	Country 30		This corporation owes the current year Inta Personal Property Tax.		□No
9. Name and Address of Curre		701		10. Name and Address of New Registered A	gent	
0. 1741110 4170 73441000 01 00110		81	Name			
CHANG, JULIO -6965 NW 74TH ST 9866 SI -MEDLEY FL 33166 MI AMI	W 284 ST	82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
-MEDLEY-FL-33166 /MI AMI	FL 33165	83			. **	
		84	City	FL	85 Zip C	ode
agent. I am familiar with, and accept the oblig- SIGNATURE Signature, typed or printed name of registered age	ent and title if applicable. (NOTE: F	thorized by da Statutes.	the comporation	n's board of directors. I hereby accept the appoint	tment as reg	istered
	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE PD CHANG, JULIO CHANG, JU	□ DELETE 6 SW 28 # ST 11 FL 33165	1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST			Change	Addition
TITLE	☐ DELETE	2.1 TITLE			☐ Change	Addition
NAME		2.2 NAME	-			
STREET ADDRESS CITY-ST-ZIP	مجاديسات من سيد	2.3 STREET 2.4 CITY-S				
TITLE	☐ DELETE	3.1 TITLE			Change	Addition
NAME		3.2 NAME	Ì			-
STREET ADDRESS		3.3 STREET	ADDRESS			
CITY-ST-ZIP		3.4. CITY-S	T-ZIP			
TITLE	☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME		4. 2 NAME		•		
STREET ADDRESS		4.3 STREET				
CITY-ST-ZIP TITLE	☐ DELETE	4.4 CITY-ST 5.1 TITLE	-217		Change	Addition
NAME	_ 000000	5.2 NAME		•	_ •	_ '
STREET ADDRESS		5.3 STREET	ADDRESS			
CITY-ST-ZIP		5.4 CITY-ST	r-ZIP			
TITLE	☐ DELETE	6.1 TITLE			Change	Addition
NAME		6.2 NAME				
STREET ADDRESS		6.3 STREET	ADDRESS			
CITY-ST-ZIP		6.4 CITY-ST	r-2IP			

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.

SIGNATURE:

HALLOST CHARGOSTRED

3/19/97 (305) 887-1902

CR2E034 (11/9