## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCU	MENT # M887	92 (0)			
ALLI	ANCE MONUMENT & MARB	LE COMPANY, INC.			
Principal Place	e of Business	Mailing Address			8110 1141 8181 81011 81811 91811 81811 81911 1981
1101   15110 00 01 Appen		5825 PLUNKETT ST. HOLLYWOOD FL 330	23		
		00		3. Date Incorporated or Qualified 07/08/1988	3a. Date of Last Report 01/17/1995
_2. Principal Pl 21	face of Business	2a. Mailing Address 26		4. FEI Number	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		65-0116389	Not Applicable
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stati	e	City & State		6. Election Campaign Financing	\$5.00 мау Ве
<b>23</b>	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	This corporation has liability for Florida Statutes	
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New F	Registered Agent
DADA	NV ID CANDOD		81 Name		
Barany Jr, Sandor 5825 Plunkett St			82 Street	Address (P.O. Box Number is Not Acceptat	(ek
	YWOOD FL 33023		83		
			B4 City		[a=1, 2, 6, 1
	A		1 1 1 1		FL 85 Zip Code
or register	to the provisions of Sections 607 6502 red agent, or both, in the State of Piorio	and 60//1508, Florida Statute ia. Suop phange was authorize	s, the above-named co of by the corporation's	orporation submits this statement for the pur board of directors. I hereby accept the app	pose of changing its registered office
	th, and/accept the obligations of Secti	on 607/U505, Florida Statutes.	VIDOR S	BARDMY JR. 1	-19-96
SIGNATURE	statute, typed or printed name of registered agent.	and title if applicable (NOT	L. Registered Agent signature r	equired when reinstating)	CIATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	
TITLE NAME	PD Barany, Sandor, Jr.	DELETE	1. 1 TITLE	T	Change Addition
STREET ADDRESS	1541 NW 199 AVE		1.2 NAME 1.3 STREET ADDRESS	1541 NW 119 DY	2
CITY-ST-ZIP	PEMBROKE LAKES FL		1.4 CITY-ST-ZIP	12 11 Mars 11 1 M	
TITLE	V	☐ DELETE	2 1 TITLE		Change Addition
NAME	BARANY, TIM		22 NAME		<b>_</b> - <b>_</b>
STREET ADDRESS	3405 SW 58 AVE		23 STREET ADDRESS		
CHY-ST-ZIP TITLE	FT LAUDERDALE FL S	FIDELLI	2 4 CITY-ST-ZIP		
NAME	BARANY, JANICE	☐ DELETE	3 1 TITLE 3.2 NAME		Change Addition
STREET ADDRESS	1541 NW 119 AVE		3.3 STREET ADDRESS		
CITY - ST - ZIP	PEMBROKE LAKES FL		3 4 CITY - ST - ZIP		_
11°LF		☐ DELETE	4. 1 TITLE	D	Change Addition
NAME			4.2 NAME	BARINY, TOM_	
STREET ADDRESS			4.3 STREET ADDRESS	2317 ROOSEVELT	21
CHY-ST-ZP Tale		C) pro cre	4.4 CITY - ST - ZIP	HOLLYWOOD, FL	
NAME		DELETE	5 1 TITLE		Change Addition
STREET ADDRESS			5 2 NAME 5 3 STREET ADDRESS		
CITY-ST ZIF			5 4 CITY-ST-ZIP		
TITLE		DELETE	6 1 THILE		Change Addition
NAME			6 2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP		101 10 1 PM	6 4 CITY - ST- ZIP		
T4. TOO REFED!	y decury that the injornation supplied w	rim inis tilina is volua≣krily furnis	thed and does not nua	lify for the exemption stated in Section 110 (	17/2Vk) Elorido Ctotutos I fuebra

certify that the information supplied with this tiling is volunturily turnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indigated 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 dysctor of the corporation by 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 axachment with an address.

SIGNATURE:

OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BORNYTC 1-19-96

Date Occupanting Phone Phone

CR2E034 (12/95)