2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000017834

Entity Name: LINIVERSAL MARBLE & GRANITE CORP

1250 S. POWERLINE ROAD

DEERFIELD BEACH, FL 33442

Address: City-St-Zip: FILED Sep 10, 2003 Secretary of State

y	mer ordiver	or a mirate a or a area, oc			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	OWERLINE R LD BEACH, FL				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	OWERLINE R LD BEACH, FL				
FEI Number	: 65-0622636	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
3929 N. FE POMPANO The above	e of Florida. É RE:	33064 US submits this statement for the p		d office or registered agent, or both,	
	Electro	nic Signature of Registered Ag	ent	Date	
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SOARES, EMA 3015 N. OCEA) Delete NUEL DUPLAA N BLVD. #104-C ALE, FL 33308	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CECATO, ADE 3015 N. OCEA) Delete LIO N BLVD. #104-C ALE, FL 33308	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	TD (SIGISMONDI,) Delete NESTOR L	Title: Name:	() Change () Addition	

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: EMANUEL DUPLAA SOARES PD 09/10/2003