

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 17, 2004 8:00 am
Secretary of State

08-17-2004 90003 037 ***150.00

DOCUMENT # P00000038530

1. Entity Name

PELICAN MARBLE & GRANITE, INC.



Principal Place of Business

24841 OLD 41 ROAD
BONITA SPRINGS FL 34135

Mailing Address

24841 OLD 41 ROAD
BONITA SPRINGS FL 34135

2. Principal Place of Business

24201 SOUTH TAMIANI TRAIL

3. Mailing Address

24201 SOUTH TAMIANI TRAIL

Suite, Apt. #, etc.

Building #1

Suite, Apt. #, etc.

Building #1

City & State

Bonita Springs FL

City & State

Bonita Springs FL

Zip

34135

Country

USA

Zip

34135

Country

U.S.A.



MOORE

CR2E034 (4/04)

4. FEI Number

59-3639427

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00

DUE BY September 8, 2004

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☒

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME VALDETTARO, ALFREDO H
STREET ADDRESS 24841 OLD 41 ROAD
CITY-ST-ZIP BONITA SPRINGS FL 34135 ☒ Delete

TITLE STD
NAME WUSCHKE, THEODORE W
STREET ADDRESS 24841 OLD 41 ROAD
CITY-ST-ZIP BONITA SPRINGS FL 34135 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME SHANON WINKELMAN
STREET ADDRESS 24201 SOUTH TAMIANI TRAIL
CITY-ST-ZIP BONITA SPRINGS FL 34135 ☐ Change ☒ Addition

TITLE ST
NAME ALFREDO VALDETTARO
STREET ADDRESS 24201 SOUTH TAMIANI TRAIL
CITY-ST-ZIP BONITA SPRINGS FL 34135 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALFREDO VALDETTARO 07-27-04 (239) 947-5291

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #