

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 10, 2001 8:00 am
Secretary of State

08-10-2001 90001 014 ***150.00

DOCUMENT # P00000040871

1. Entity Name

WELLINGTON GRANTIE & MARBLE, INC.

Principal Place of Business

**2091 INDIAN ROAD
W. PALM BEACH FL 33409**

Mailing Address

**2091 INDIAN ROAD
W. PALM BEACH FL 33409**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0305279

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TROPEANO, FRANK

2091 INDIAN ROAD

W. PALM BEACH FL 33409

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **PD**
STREET ADDRESS **TROPEANO, FRANK**
CITY-ST-ZIP **12055 REGAL COURT**
W. PALM BEACH FL 33414

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

TITLE ☐ Delete
NAME **VD**
STREET ADDRESS **TROPEANO, DEAN**
CITY-ST-ZIP **2091 INDIAN RD.**
W. PALM BEACH FL 33409

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

TITLE ☐ Delete
NAME **SD**
STREET ADDRESS **SANCHEZ, PEDRO**
CITY-ST-ZIP **12172 REGAL CT.**
W. PALM BEACH FL 33414

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

TITLE ☐ Delete
NAME **TD**
STREET ADDRESS **TROPEANO, MICHELLE**
CITY-ST-ZIP **12055 REGAL CT.**
W. PALM BEACH FL 33414

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)

Attachment
A0080813

WELLINGTON GRANITE & MARBLE, INC.
2091 INDIAN RD.
WEST PALM BEACH, FL 33409
tel: 561-686-5800 fax: 561-686-9996

Date: 08-06-01

To: Department of State

Re: Document # P00000040871

To Whom it May Concern:

This was our first year on filing this report and I do not remember receiving my first notice.

If you could please accept my check for \$ 150.00 and forgive me for my ignorance in this matter
it would be very much appreciated.

Thank you,

Michelle Tropeano

Michelle Tropeano
Treasurer