

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2002 8:00 am
Secretary of State

02-07-2002 90107 001 ***150.00
 02-07-2002 90107 002 *****8.75

DOCUMENT # P00000069729

1. Entity Name
D&C MARBLE & GRANITE, INC.

Principal Place of Business
 1650 WEST 31ST PLACE
 MIAMI FL 33012

Mailing Address
 1650 WEST 31ST PLACE
 MIAMI FL 33012

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 City & State

Zip **Country** **Zip** **Country**

4. FEI Number **65-1026389** **Applied For**
 Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

BRINGAS, CESAR
2750 N.E. 183RD STREET
N MIAMI BEACH FL 33160

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.

SIGNATURE _____ (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 \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **BRINGAS, CESAR**
STREET ADDRESS **2750 N.E. 183RD STREET**
CITY-ST-ZIP **N MIAMI BEACH FL 33160**

TITLE **S** ☐ Delete
NAME **ROSALES, DEMETRIO**
STREET ADDRESS **1650 W 31ST PL**
CITY-ST-ZIP **MIAMI FL 33012**

TITLE **T** ☒ Delete
NAME **ARQUIMIDES, CLEMENTE**
STREET ADDRESS **1650 W 31ST PL**
CITY-ST-ZIP **MIAMI FL 33012**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition
NAME **Bringas, Cesar**
STREET ADDRESS **2750 N.E. 183rd. St.**
CITY-ST-ZIP **N.Miami beach, Fl. 33160**

TITLE **S** ☒ Change ☐ Addition
NAME **Rosales, Demetrio**
STREET ADDRESS **1650 W 31st. Pl**
CITY-ST-ZIP **Miami, Fl. 33012**

TITLE **T** ☒ Change ☐ Addition
NAME **Mena, Alexis**
STREET ADDRESS **1650 W. 31st! PL**
CITY-ST-ZIP **Miami, Fl. 33012**

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

TITLE ☐ Change ☐ Addition
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)(l), 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: *Cesar M. Bringas* **REQUIRED PRESIDENT** **01/23/02 (301) 823-8669**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)