2007 FOR PROFIT CORPORATION

CITY-ST-7/P

FILED **ANNUAL REPORT** Aug 10, 2007 08:00 Al Secretary of State DOCUMENT # P00000093228 1. Entity Name BALTIC MARBLE, INC. .) _ -Principal Place of Business... The Color of Languages and the following of 961 MILL CREEK DR. 961 MILL CREEK DR. PALM BEACH GARDENS, FL 33410 961 MILL CREEK DR. PALM BEACH GARDENS, FL 33410 guiern sig liggs kiep at gig (penegyeut jings er with profession of the second 06042007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1062748 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BUDZINAUSKAS, EDVINAS DO NOT WRITE 961 MILL CREEK DR. PALM BEACH GARDENS, FL 33410 IN THIS SPACE 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) , 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 14, 2007 Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS 10. TITLE **BUDZINAUSKAS, EDVINAS** NAME STREET ADDRESS 961 MILL CREEK DR. U00000771900 CITY-ST-ZIP PALM BEACH GARDENS, FL 33410 08/10/07-80006-006 150.00 TITLE BUDZINAUSKAS, LINA NAME STREET ADDRESS 961 MILL CREEK DR. CITY-ST-ZIP PALM BEACH GARDENS, FL 33410 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

SIGNATURE: Lelei vear 08-06-01 561-436-3774 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.