FILED

2001 UNIFORM BUSINESS REPORT (UBR)

May 14, 2001 8:00 am DOCUMENT # P00000105531 Secretary of State AMAZON MARBLE AND GRANITE, INC. 05-14-2001 90227 020 ***158.75 Principal Place of Business Mailing Address 7811 N.W. 72ND AVENUE 7811 N.W. 72ND AVENUE MIAMI FL 33166 MIAMI FL 33166 TAEACAAA 2. Principal Place of Business NW 66 ST. 66 ST. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SOARES: RONALD 9437 N.W. 72ND AVENUE MIAMI FL 33166 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CR2E034 (10/00) TITLE ☐ Delete TITLE RONALD SOARES SOARES, RONALD NAME NAME 7775 NW 6655. 9437 S.W. 143RD PLACE STREET ADDRESS STREET ADDRESS **MIAMI FL 33186** MIAMI FC 33166 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Rubio, David S RUBIO, DAVID S NAME NAME 7775 NW 66 ST 7813 N.W. 72ND AVENUE STREET ADDRESS STREET ADDRESS MIRMI, FL 33166 CITY-ST-ZIP **MIAMI FL 33166** CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Addition TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 supplierned a 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 OFFRINTED NAME OF SIGNING OFFICER OR DIRECTOR