2002 UNIFORM BUSINESS REPORT (UBR)

Mar 03, 2002 8:00 am § Secretary of State DOCUMENT # P01000058570 1. Entity Name 03-03-2002 90119 004 ***150.00 OLYMPIC STONE & MARBLE SUPPLY, INC. Principal Place of Business Mailing Address 3811 PEMBROKE PINES RD. 3811 PEMBROKE PINES RD. HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-111013 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BOND, DAVID Street Address (P.O. Box Number is Not Acceptable) 3811 PEMBROKE PINES RD. HOLLYWOOD FL 33021 City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE CR2E034 (9/01 NAME NAME BOND BOND, DAVID PEMBROKE ROAD STREET ADDRESS STREET ADDRESS 3811 PEMBROKE PINES RD. CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 Hry LYWOOD, FL. 33021 TITLE ☐ Delete TITLE ☐ Change TAMES BUND NAME NAME STREET ADDRESS STREET ADDRESS PEMBROKE ROND CITY-ST-ZIP CITY-ST-7IP Addition TITLE □ Delete TITLE Change NAME NAME 3811 PEMBEDIE KUND STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD. 19L. 33021 TITLE Delete TITLE ☐ Change 🛣 Addition MILHELE BOND NAME NAME PEMBRUKE RUPTO STREET ADDRESS STREET ADDRESS HOLWWOOD, FL. 23021 CITY-ST-ZIP CITY-ST-7IP Addition TITLE ☐ Delete TITLE ☐ Change CHAEL JUSKIEWICZ NAME NAME 3811 rombedice rumo STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DIDE ☐ Delete TITLE BUND NAME NAME STREET ADDRESS PEMBRUKE STREET ADDRESS CITY-ST-ZIP MOUYWOOD, FL. 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 print stee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

all other like empowered.

changed, or on an attachment

2-1802

954-792-0076

FILED