2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2008
Secretary of State

DOCUMENT# P01000058570

Entity Name: OLYMPIC STONE & MARBLE SUPPLY, INC.

Current Principal Place of Business:

1141 NW 31ST AVENUE
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

1141 NW 31ST AVENUE
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 65-1110137 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOND, DAVID A
2701 REESE ROAD
DAVIE, FL 33314 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: BOND, DAVID A
Address: 2701 REESE ROAD
City-St-Zip: DAVIE, FL 33314

Title: VD ( ) Delete
Name: BOND, ARTHUR H
Address: 2701 REESE ROAD
City-St-Zip: DAVIE, FL 33314

Title: VD ( ) Delete
Name: BOND, JAMES S
Address: 2701 REESE ROAD
City-St-Zip: DAVIE, FL 33314

Title: VD ( ) Delete
Name: BLAIR, JAMES
Address: 2701 REESE ROAD
City-St-Zip: DAVIE, FL 33314

Title: S ( ) Delete
Name: BOND, MICHELE M
Address: 2701 REESE ROAD
City-St-Zip: DAVIE, FL 33314

Title: T ( ) Delete
Name: JUSKIEWICZ, MICHAEL
Address: 2701 REESE ROAD
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BOND, DAVID A
Address: 2701 REESE ROAD
City-St-Zip: DAVIE, FL 33314

Title: VP (X) Change ( ) Addition
Name: BOND, ARTHUR H
Address: 2701 REESE ROAD
City-St-Zip: DAVIE, FL 33314

Title: VP (X) Change ( ) Addition
Name: BOND, JAMES S
Address: 2701 REESE ROAD
City-St-Zip: DAVIE, FL 33314

Title: VP (X) Change ( ) Addition
Name: BLAIR, JAMES
Address: 2701 REESE ROAD
City-St-Zip: DAVIE, FL 33314

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHELE M BOND S 04/10/2008
Electronic Signature of Signing Officer or Director Date