

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 91212 029 ***158.75

DOCUMENT # **P01000088300**

1. Entity Name

AMERICAN GRANITE & MARBLE, INC.

DO NOT WRITE IN THIS SPACE

11005173

2. Principal Place of Business

5944 CORAL RIDGE DR.

3. Mailing Address

5944 CORAL RIDGE DR.

Suite, Apt. #, etc.

201

Suite, Apt. #, etc.

201

DO NOT WRITE IN THIS SPACE

City & State

CORAL SPRINGS, FL

City & State

CORAL SPRINGS, FL

4. FEI Number

65-1142547

Applied For

Not Applicable

Zip

33076

Country

USA

Zip

33076

Country

USA

5. Certificate of Status Desired

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**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name **KEMPE, ROBERT**

Street Address (P.O. Box Number is Not Acceptable)

LANCASTER PL. 9703

City

BOCA RATON

FL

Zip Code

33434

**DO NOT WRITE
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.

SIGNATURE

Signature, typed or printed name of registered agent, if applicable.

(NOTE: Registered Agent signature required when reissuing)

DATE

04-17-03

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

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January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D ROBERT KEMPE 9703 LANCASTER PL. BOCA RATON, FL 33434 |
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**DO NOT WRITE
IN THIS SPACE**

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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with another like empowered.

SIGNATURE:

ROBERT KEMPE

04-17-03

(954) 592 7475

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number

CR2ED34B (12/01)