2003 FOR PROFIT CURPURATE UNIFORM BUSINESS REPORT (UBR)

FILED Jun 16, 2003 8:00 am Secretary of State 05-05-2003 91893 035 ***150.00

1. Entity Nam		# PUTO! MARBLE INC.	0009253	39 √			03-1	J3-2003 918		
Principal Place of Business 3 LILAC DR. DEBARY FL 32713			Mailing Addre 701 THISTLE I WINTER SPRIM	PL					OFUCG	343
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2. Principal Place of Business			3. Mailing Add	3 Mailing Address Dr			i company	edicinate da	elli an eta ".	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & Stat	City & State		City & State	City & State Debary FL		4.	4. FEI Number 59-3749921.3 75 10 25 Applied For Not Applicable			
Zip		Country	3771		Country USA	5.	. Certificate of Status		\$9.75 A	dditlonal
	6. Name a	nd Address of Curren	it Registered Ageni	<u> </u>			Name and Addres	s of New Regist		
- MC HIGH	L STEVEN A				Name/	1 An	v. Me			
3 LILAC D		يحيص بالمحال بيجود			-Street A	Iddiess (P.O.	-Dox Number is Not	Accopiable) _==		
DEBARY F					<u> </u>	11 H-	<u> </u>			······
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9. The shows		submits this statement	far the purpose of cl	hanging its ragi	istered office o	registered a	agent, or both, in the	State of Florida.		
the obligat	Zille	ed agent. 45 V. M.C. printed name of registered agen	hugh	PRO LE PRO	Sale Agent Signal	Mrs required when	Mcheys	9 61	13/03 DATE	
SIGNATURE F	Signature, typed or TILE NOW!!! r May 1, 2003	45 V. MC	had brownpicabe.	MO LE PRO	Sold Agent signal	M. J.	9. Efection Ca	ampaign Financia Contribution.	·	.00 May Be
SIGNATURE F After Make Check	Signature, typed or TILE NOW!!! r May 1, 2003 k Payable to F	printed name of registreed agent FEE IS \$150.00 Fee will be \$550.00	Of State		11.		9. Election Ca Trust Fund	Contribution. ES TO OFFICER	Add	RS IN 11
SIGNATURE F After Make Chack	Signature, typed or TILE NOW!!! r May 1, 2003	Printed name of registered agent FEE IS \$150.00 Fee will be \$550.00 Florida Department of OFFICERS AND	Of State			3+20 3 61	9. Election Ca Trust Fund ADDITIONS/CHANG ICE Press	Contribution. ES TO OFFICER Jean E	☐ Add	RS IN 11
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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.

SIGNATURE: LIBERTY UCKURA GO OFFICER OF DEFECTOR DESCRIPTION OF THE PROPERTY OF SUMMING OFFICER OF DEFECTOR

12903 386 753-0810