

2004 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000041785

1. Entity Name

STORIA MARBLE & GRANITE, INC.

FILED

04 OCT 29 AM 10:42

Principal Place of Business	Mailing Address
6141 MID METRO DR BLDG IV UNIT 5 FT MYERS FL 33912	6141 MID METRO DR BLDG IV UNIT 5 FT MYERS FL 33912

SECRETARY OF STATE
REDAK HASSEE-FLORIDA
RECEIVED

800042316038
10/29/04--01058--001 **150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite Apt. #, etc.		Suite. Apt. #. etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number	Applied For
77-0588936	Not Applicable

5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
TAX HOUSE CORPORATION 3929 N FEDERAL HWY POMPANO BEACH FL 33064		Name Street Address (P O. Box Number is Not Acceptable) City FL 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) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW! FEE IS \$150.00 After MAY 1, 2004 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS /CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT SIQUEIRA, ELCIO 3419 WINKLER EXT, 502 FT. MYERS FL 33916 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE-PRESIDENT LUCIA MENDONCA 3419 WINKLER EXT, 502 FT. MYERS FL 33916 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(1), 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 Block 12 N changed or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/25/2004

(239) 939-0969

Date

Daytime Phone #

FLORIDA DEPARTMENT OF STATE
Division of Corporation
2004 Uniform Business Report (UBR)
P.O. Box 6327
Tallahassee, FL 32314

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STORIA MARBLE & GRANITE, INC.

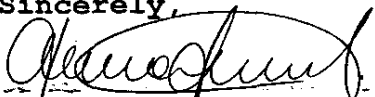
To Whom It May Concern:

~~This letter is to inform you that the corporation~~
mentioned above has been made inactive for non-payment of
the Annual Report which had a deadline of 05/01/2004.

Unfortunately, I do not have anything in file ,and I
do not remember receiving notice of our obligation to file
an annual report. As a result of this misunderstanding I
was unaware of my corporation becoming inactive. I now
want to reinstate it, but I am asking that the
reinstatement fee be waived. Along with this letter I am
including a check of \$150.00.

Thank you for your attention, should you have any
questions please do not hesitate to contact me using the
information listed below.

Sincerely,



STORIA MARBLE & GRANITE, INC.

Lucia Mendoncia- President

6141 MID METRO DR BLDG IV UNIT 5

Fort Myers, FL 33901

Phone: (239) 939-0969