


2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Page 1 of 2

DOCUMENT # P02000053476			
1. Entity Name A.S. MARBLE INC.			
Principal Place of Business 18702 NW. 90 AVENUE HIALEAH FL 33018		Mailing Address 18702 NW. 90 AVENUE HIALEAH FL 33018	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

FILED
03 DEC 17 PM 1:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **04-3703053** Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SOCAS, ALEXIS J
18702 NW. 90 AVENUE
HIALEAH FL 33018

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	SOCAS, ALEXIS J	
STREET ADDRESS	18702 NW. 90 AVENUE	
CITY-ST-ZIP	HIALEAH FL 33018	
TITLE	S	<input type="checkbox"/> Delete
NAME	VINCENTE, GUILLERMO	
STREET ADDRESS	18702 NW. 90 AVENUE	
CITY-ST-ZIP	HIALEAH FL 33018	
TITLE	T	<input type="checkbox"/> Delete
NAME	HERNANDEZ, LAZARO	
STREET ADDRESS	18702 NW. 90 AVENUE	
CITY-ST-ZIP	HIALEAH FL 33018	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	300025868053	
CITY-ST-ZIP	12/31/03--01011--018 **8.75	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if 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

4/11/03

305-606-1878

Date

Daytime Phone #

CR2502 11/03

GLORIA M. BATULE, P.A.

CERTIFIED PUBLIC ACCOUNTANT

782 N.W. LE JEUNE ROAD
SUITE 440
MIAMI, FLORIDA 33126

TELEPHONE (305) 441-6464
FACSIMILE (305) 445-0543

December 4, 2003

Ms Glenda E. Hood
Secretary of State, Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314-6327

Re: A.S. Marble, Inc - Document #P02000053476

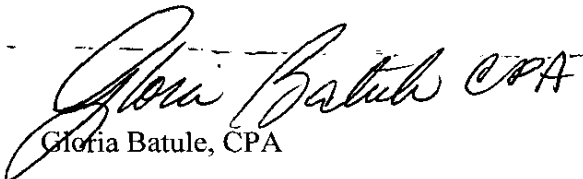
Ms Hood:

The Florida Department of State has issued a Notice of Administrative Dissolution or Revocation against the above referenced company in error. As can be evinced by the attached copy of the canceled check, the Uniform Business Report was filed on a timely basis thus negating any need for the revocation. We ask that your department correct this status.

Additionally, a check in the amount of \$8.75 is enclosed for a Certificate of Status to be forwarded.

We hope this will be resolved in a prompt manner.

Yours Truly,


Gloria Batule, CPA