

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000055614

FILED
Sep 01, 2004
Secretary of State

Entity Name: GRANITE DEPOT INC.

Current Principal Place of Business:

1315 29TH STREET, SUITE A
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

1315 29TH STREET, SUITE A
ORLANDO, FL 32805

New Mailing Address:

FEI Number: 03-0444807 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINS, LEONOR
9640 BOGGY CREEK ROAD UNIT 2
ORLANDO, FL 32824 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MARTINS, LEONOR A
Address: 6742 EDGEWATER DRIVE
City-St-Zip: ORLANDO, FL 32819

Title: VD () Delete
Name: FURLAN, OSWALDO JR
Address: AV TIRADENTES, SUL 234, CENTRAL PEDERNEIRA
City-St-Zip: SAO PAULO, BRAZIL,

Title: TD () Delete
Name: MORALES, ADILSON
Address: ALMEDA CONEGO ANIBAL DIFRANCIA, 5-56
City-St-Zip: PARQUE VISTA ALEGRE-BAURU, SP

Title: SD () Delete
Name: MORALES, GUSTAVO
Address: ALMEDA CONEGO ANIBAL DIFRANCIA, 5-56
City-St-Zip: PARQUE VISTA ALEGRE-BAURU, SP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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 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: LEONOR A MARTINS

PD

09/01/2004

Electronic Signature of Signing Officer or Director

_____ Date