

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2004 8:00 am
Secretary of State

03-11-2004 90021 004 ***150.00

DOCUMENT # P02000076705

1. Entity Name
METEOR GRANITE & MARBLE, INC.



Principal Place of Business
**311 ANSIN BLVD.
HALLANDALE, FL 33009 US**

Mailing Address
**1103 N.W. 58TH TERR.
APT. 122
SUNRISE, FL 33313 US**

64015147



2. Principal Place of Business

3. Mailing Address

311 Ansin Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02262004

Chg-P

CR2E034 (10/03)

City & State

City & State
Hallandale, FL

4. FEI Number

54-2064783

Applied For

Not Applicable

Zip

Country

Zip
33313

Country
US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HAGEN & HAGEN, P.A.
3531 GRIFFIN RD.
FT. LAUDERDALE, FL 33312**

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, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSTD
BALLA, ANDREI
1103 N.W. 58TH TERR., STE. 122
SUNRISE, FL 33313** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
BARTHA, BILLY
6005 DEL LAGO 6 APT 205
SUNRISE, FL 33313** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
ZOLTAN, TOT
109 SOUTH CORTEZ DRIVE, CIRCLE Q
POMPANO BEACH, FL 33068** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TOTH, ZOLTAN ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

Andre Balla

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 8, 2004

Date

Daytime Phone #