


**2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**Mar 09, 2007 8:00 am**  
**Secretary of State**

03-09-2007 90005 044 \*\*\*150.00

**DOCUMENT # P02000126783**  
 1. Entity Name  
**GRANITE & MARBLE SPECIALISTS, INC.**



Principal Place of Business: **1829 BRAMAN AVE. FT. MYERS FL 33901**  
 Mailing Address: **1829 BRAMAN AVE. FT. MYERS FL 33901**



2. Principal Place of Business - No P.O. Box #: **15800-2 Brothers Ct**  
 Suite, Apt. #, etc. \_\_\_\_\_

3. Mailing Address: **15800-2 Brothers Ct**  
 Suite, Apt. #, etc. \_\_\_\_\_

1st MOORE CR2E034 (10/06)

City & State: **Fort Myers FL**  
 Zip: **33912** Country: **USA**

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 Zip: **33912** Country: **USA**


4. FEI Number: **22-3886647**  
 Applied For:  Not Applicable

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

6. Name and Address of Current Registered Agent  
**RUCK, DANIEL T**  
**1829 BRAMAN AVE.**  
**FT. MYERS FL 33901**

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:  \_\_\_\_\_ DATE: **2/27/07**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 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	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
PD	RUCK, DANIEL T	1829 BRAMAN AVE.	FT. MYERS FL 33901	<input type="checkbox"/>
V.	DECOSTA, JAMES	1461 CHARLES RD	FORT MYERS FL 33919	<input type="checkbox"/>
T	NITA, FLORES T	1829 BRAMAN AVE	FORT MYERS FL 33901	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

Handwritten entries in Block 11:  
 - 2602 45th St SW, Lehigh FL 33971-4707 (Change)  
 - Nita Ruck (Change)

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:  \_\_\_\_\_ DATE: **2/27/07** (239) 481-5955

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR