2006 FOR PROFIT CORPORATION

ANNUAL REPORT

FILED Feb 20, 2006 08:00 AM Secretary of State

Principal Place of Busine	SS

1. Entity Name

DOCUMENT # P02000128990

CONTINENTAL GRANITE AND MARBLE, INC.

Mailing Address

900 NORTH ORANGE AVENUE DAYTONA BEACH, FL 32114

900 NORTH ORANGE AVENUE DAYTONA BEACH, FL 32114

199355	18 55 11	\$1831 8331	1135 SS(0)	SHIP NEWS		55511 5565EFF F	M
111173	33, 33,11				1 100		{{ {{{II}}}
311333	8 8 8 8 8	33331 1138	3468 55 56	33 (1.3)	3 (1) 3 (1)	(SSK 15%55)	\$ 5 5 6 1

DO NOT WRITE IN THIS SPACE

02162006	No Chg-P	CR2E034 (11/05)

4. FEI Number 06-1670895 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RUSSELL, RODNEY L 1030 NORTH ORANGE AVENUE ORLANDO, FL 32801

DO NOT WRITE

			IIV	INIS SPACE
	named entity submits this statement for the paons of registered agent.	urpose of changing its registered office	or registered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature typed or printed name of registered agent and title	Il applicable (NOTE Registered Agent sig	mature required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
TITLE NAME STREET ADDRESS CALY-ST-ZEP THE NAME SHEEL AUTHLSS CITY-ST-ZEP TITLE NAME SHEEL AUTHLSS CITY-ST-ZEP TITLE NAME SHEEL ADDRESS CITY-ST-ZEP TALE NAME SHEEL ADDRESS CITY-ST-ZEP TALE NAME STREET ADDRESS CITY-ST-ZEP NAME STREET ADDRESS CITY-ST-ZEP TALE NAME STREET ADDRESS CITY-ST-ZEP TALE NAME STREET ADDRESS CITY-ST-ZEP TALE NAME STREET ADDRESS CITY-ST-ZEP	PT HALEY, PHILLIP J 900 NORTH ORANGE AVENUE DAYTONA BEACH, FL 32114 VS HALEY, DANIEL 900 NORTH ORANGE AVENUE DAYTONA BEACH, FL 32114	TORS		Un0000440542 03/02/88-80045-007 150.00 NOT WRITE THIS SPACE
TITLE NAME				

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions-contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report of supplemental report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation of 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:

STREET ADDRESS

SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-17-2006

386-586-7059