

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000023738

1. Entity Name
ROCCASALVO MARBLESTYLE CORP.



Principal Place of Business
**3120 COLLINS AVENUE #406
MIAMI BEACH, FL 33140**

Mailing Address
**3120 COLLINS AVENUE #406
MIAMI BEACH, FL 33140**



01182008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0081739

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**ROCCASALVO, RUBEN
3120 COLLINS AVENUE #406
MIAMI BEACH, FL 33140**

**DO NOT WRITE
IN THIS SPACE**

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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **PD**
NAME **ROCCASALVO, RUBEN**
STREET ADDRESS **3120 COLLINS AVENUE #406**
CITY-ST-ZIP **MIAMI BEACH, FL 33140**

TITLE **VD**
NAME **ROCCASALVO, NESTOR H**
STREET ADDRESS **3120 COLLINS AVENUE #406**
CITY-ST-ZIP **MIAMI BEACH, FL 33140**

TITLE
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03/16/06-80038-002 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby 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 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 1 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

RUBEN ROCCASALVO
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAR 06/06 305-672-40
Date Daytime Phone #