2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000046938

Entity Name: EXOTIC MARBLE CREATIONS INC

FILED Mar 23, 2007 Secretary of State

Entity Name: EXOTIC MARBLE CREATIONS, INC.					
Current P	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
7942 NW (MIAMI, FL					
Current Mailing Address:			New Mailing Address	New Mailing Address:	
7942 NW 6 MIAMI, FL					
FEI Number	: 13-4250418	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
RODRIGUEZ, GUILLERMO 4011 W. FLAGLER ST., SUITE 403 MIAMI, FL 33134 US			POLANCO, HAROLD 4903 SW 166TH AVE MIRAMAR, FL 33027	US	
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: HAROLD POLANCO				03/23/2007	
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (POLANCO, HA 4903 SW 1661 MIRAMAR, FL	'H AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD (POLANCO, CR 4903 SW 1661 MIRAMAR, FL	H AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD (CARDONA, JU 5401 SW 77 C MIAMI, FL 33	T#E 206	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GUTIERREZ, S 9915 W OKE) Delete SAYMI ECHOBEE RD. # 5-501 DENS, FL 33016 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	SD (X RESTREPO, V 15455 SW 80		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

City-St-Zip:

SIGNATURE: HAROLD POLANCO PD 03/23/2007

City-St-Zip: MIAMI, FL 33196 US