


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000090639

1. Entity Name
 I DO MARBLE, INC.



Principal Place of Business Mailing Address

5442 TANGERINE AVENUE 5442 TANGERINE AVENUE
 WINTER PARK, FL 32792-7309 WINTER PARK, FL 32792-7309



DO NOT WRITE IN THIS SPACE

03252005 No Chg-P CR2E034 (10/03)

4. FEI Number 37-1473594	Applied For Not Applicable
-----------------------------	-------------------------------

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

6. Name and Address of Current Registered Agent

ROY, CRAIG R
 5442 TANGERINE AVENUE
 WINTER PARK, FL 32792-7309

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 _____ DATE _____
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, 2005 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	PDT ROY, CRAIG R 5442 TANGERINE AVENUE WINTER PARK, FL 327927309
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVS LATHAM, J. IVY 5442 TANGERINE AVENUE WINTER PARK, FL 327927309
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000354529
 05/03/05-80110-024 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: J. Ivy Latham Date: 4-29-05 Daytime Phone #: 407.448.1870
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR