

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90121 008 ***150.00

DOCUMENT # P03000109231

1. Entity Name
J M MARBLE & GRANITE INSTALLATION INC.



Principal Place of Business
**9521 FOUNTAINEBLEAU BLVD STE 427
MIAMI, FL 33172**

Mailing Address
**9521 FOUNTAINEBLEAU BLVD STE 427
MIAMI, FL 33172**

14019393



2. Principal Place of Business
14723 SW 9 TERR
Suite, Apt. #, etc.

3. Mailing Address
14723 SW 9 TERR
Suite, Apt. #, etc.

04242004 Chg-P CR2E034 (10/03)

City & State
MIAMI, FL

City & State
MIAMI, FL

4. FEI Number
200-279-550

Applied For
Not Applicable

Zip
33194

Country
MIAMI DADE

Zip
33194

Country
MIAMI DADE

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

6. Name and Address of Current Registered Agent

**RESTREPO, MAURICIO
9521 FOUNTAINEBLEAU BLVD STE 427
MIAMI, FL 33172**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

14723 SW 9 TERR

City **MIAMI**

FL

Zip Code
33194

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, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **RESTREPO, MAURICIO**
STREET ADDRESS **9521 FOUNTAINEBLEAU BLVD STE 427**
CITY-STATE-ZIP **MIAMI, FL 33172**

TITLE **V** ☐ Delete
NAME **SUAREZ, JOSE**
STREET ADDRESS **9521 FOUNTAINEBLEAU BLVD STE 427**
CITY-STATE-ZIP **MIAMI, FL 33172**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **14723 SW 9 TERR**
CITY-STATE-ZIP **MIAMI, FL 33194**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **14723 SW 9 TERR**
CITY-STATE-ZIP **MIAMI, FL 33194**

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), 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 officers empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Mauricio Restrepo **4-28-04**