2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 16, 2005 8:00 am
Secretary of State
05-16-2005 90199 044 ***158.75

DOCUMENT # P03000124954

1. Entity Name
GML MARBLE & GRANITE CORP.

Principal Place of Business	Mailing Address
3474 W 84 ST BAY # 106 HIALEAH, FL 33018	3474 W 84 ST BAY # 106 HIALEAH, FL 33018

DO NOT WRITE IN THIS SPACE

05102005 No Chg-P CR2E034 (10/03)

4. FEI Number
20-0365261
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GIL, GIOVANNA C
10207 NW 126TH STREET
HIALEAH, FL 33018

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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 changing)

FILE NOW!!! FEE IS $550.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** may be added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	GIL, GIOVANNA C
STREET ADDRESS	10207 NW 126 ST
CITY-ST-ZIP	HIALEAH, FL 33018
TITLE	V
NAME	IZAGUIRRE, MIHAIL
STREET ADDRESS	10207 NW 126 ST
CITY-ST-ZIP	HIALEAH, FL 33018
TITLE	S
NAME	GIL, LUIS
STREET ADDRESS	10207 NW 126 ST
CITY-ST-ZIP	HIALEAH, FL 33018
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(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 like empowered.

SIGNATURE: X _____ 05-11-05 3055121378
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number