

**FILED**  
**Apr 30, 2004 8:00 am**  
**Secretary of State**

04-30-2004 90229 012 \*\*\*150.00

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**DOCUMENT # P03000137474**

1. Entity Name  
**MARIO'S MARBLE & TILE, INC.**



Principal Place of Business  
**548 S. CRESCENT DRIVE  
HOLLYWOOD, FL 33021**

Mailing Address  
**548 S. CRESCENT DRIVE  
HOLLYWOOD, FL 33021**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02062004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number

**54-2134890**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RICCI, MARIO  
548 S. CRESCENT DRIVE  
HOLLYWOOD, FL 33021**

Name

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

City

**FL**

Zip Code

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PSTD  
RICCI, MARIO  
548 S. CRESCENT DRIVE  
HOLLYWOOD, FL 33021**

☐ Delete

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

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12. 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:

*Mario Ricci*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/11/04**  
Date

**3084 563-7876**  
Daytime Phone #