

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P03000146756

1. Entity Name

J.D. MARBLE & STONES, INC.



Principal Place of Business

9041 SW 156 ST SUITE B-130
MIAMI, FL 33157

Mailing Address

3111 NW 21 AVE
MIAMI, FL 33142

FILED
06 MAY 31 AM 9:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04172006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

33-1078049

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DE LOS SANTOS, JOSE
3111 NW 21 AVE #1
MIAMI, FL 33142

**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

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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000537218
05/09/06 00000 000 150.00

10. OFFICERS AND DIRECTORS

TITLE P
NAME DE LOS SANTOS, JOSE
STREET ADDRESS 9041 SW 156 ST SUITE B-130
CITY-ST-ZIP MIAMI, FL 33157

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

700076251417
06/16/06--01012--015 **150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #