2007 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Feb 09, 2007 08:00 AM DOCUMENT # P04000154649 **Secretary of State** LEO MARBLE FLOORING CORP. Principal Place of Business Mailing Address 2322 NW 22 COURT 2322 NW 22 COURT MIAMI, FL 33142 MIAMI, FL 33142 No Chg-P CR2E034 (11/05) 01222007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 41-2157344 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BECERRA, LEONARDO DO NOT WRITE 2322 NW 22 COURT MIAMI, FL 33142 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 nted name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) U00000629990 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 02/19/07-80022-014 150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE BECERRA, LEONARDO NAME STREET ADDRESS 2322 NW 22 COURT CITY-ST-ZIP MIAMI, FL 33142 TITLE GARCIA, BORIS NAME STREET ADDRESS 2322 NW 22 COURT CITY-ST-ZIP MIAMI, FL 33142 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 it changed, or on an attachment with an address, with all other like empowered.

22/07

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR