2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Mar 15, 2007
Secretary of State

DOCUMENT# P05000090067

Entity Name: ARGENTINA MARBLE INC

Current Principal Place of Business:

1814 PIERCE DR
LAKE WORTH, FL 33460

New Principal Place of Business:

1517 CRESTWOOD BLVD
LAKE WORTH, FL 33460

Current Mailing Address:

1814 PIERCE DR
LAKE WORTH, FL 33460

New Mailing Address:

1517 CRESTWOOD BLVD
LAKE WORTH, FL 33460

FEI Number: 20-4197102 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DATENA, INGRID
% COSMOPOLITAN INSURANCE
3150 CONGRESS AVE
LAKE WORTH, FL 33461 US

Name and Address of New Registered Agent:

GALVAN, LUCAS M
1517 CRESTWOOD BLVD
LAKE WORTH, FL 33460 US

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.

SIGNATURE: LUCAS M GALVAN 03/15/2007
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: GALVAN, LUCAS M
Address: 1814 PIERCE DR
City-St-Zip: LAKE WORTH, FL 33460

Title: VP ( ) Delete
Name: GALVAN, LUCAS M
Address: 1814 PIERCE DR
City-St-Zip: LAKE WORTH, FL 33460

Title: S (X) Delete
Name: OBIANO, MARIA L
Address: 817 34TH ST
City-St-Zip: W PALM BEACH, FL 33407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change ( ) Addition
Name: GALVAN, LUCAS M
Address: 1517 CRESTWOOD BLVD
City-St-Zip: LAKE WORTH, FL 33460

Title: VP (X) Change ( ) Addition
Name: GALVAN, NATALIA E
Address: 1517 CRESTWOOD BLVD
City-St-Zip: LAKE WORTH, FL 33460

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUCAS M GALVAN P 03/15/2007
Electronic Signature of Signing Officer or Director Date