## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P05000148179

Entity Name: CONSTANTINO MARBLE ENTERPRISE INC

FILED Oct 30, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

28165 GO BY TRL 15472 CORTONA WAY BONITA SPRINGS, FL 34135 NAPLES, FL 34120

**Current Mailing Address: New Mailing Address:** 

28165 GO BY TRL 15472 CORTONA WAY BONITA SPRINGS, FL 34135 NAPLES, FL 34120

FEI Number: 20-4062205 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

VERDES, KATHY V VERDES, KATHY V 7960 PRÉSERVE CR. 15472 CORTONA WAY NAPLES, FL 34120 NAPLES, FL 34119 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: KATHY VERDES 10/30/2007

> 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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition VERDES, KATHY V VERDES, KATHY V Name: Name:

28165 GOBY TRL 15472 CORTONA WAY Address: Address: City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: NAPLES, FL 34120

Title: VΡ Title: VΡ (X) Change ( ) Addition () Delete

Name: VERDES, CONSTANTIN Name: VERDES, CONSTANTIN 28165 GOBY TRL Address: 15472 CORTONA WAY Address: BONITA SPRINGS, FL 34135 NAPLES, FL 34120 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

Ρ SIGNATURE: KATHY VERDES 10/30/2007