

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000062566

FILED  
Feb 20, 2007  
Secretary of State

Entity Name: TRANSLUCID MARBLE INC.

## Current Principal Place of Business:

22536 LOGWOOD AVE  
BOCA RATON, FL 33428 US

## New Principal Place of Business:

19289 DELAWARE CT  
BOCA RATON, FL 33434 US

## Current Mailing Address:

22536 LOGWOOD AVE  
BOCA RATON, FL 33428 US

## New Mailing Address:

19289 DELAWARE CT  
BOCA RATON, FL 33434 US

FEI Number: 20-4801006

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAMPAIO, SANDRO P  
22536 LOGWOOD AVE  
BOCA RATON, FL 33428 US

## Name and Address of New Registered Agent:

SAMPAIO, VLADIMIR  
19289 DELAWARE CT  
BOCA RATON, FL 33434 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: VLADIMIR SAMPAIO

02/20/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: SAMPAIO, SANDRO P  
Address: 22536 LOGWOOD AVE  
City-St-Zip: BOCA RATON, FL 33428 US

Title: VP ( ) Delete  
Name: SAMPAIO, VLADIMIR A  
Address: 19289 DELAWARE CT  
City-St-Zip: BOCA RATON, FL 33434 US

Title: VP ( ) Delete  
Name: MAZONETTO, LEANDRO C  
Address: RUA VALPARAISO #46  
City-St-Zip: BLUMENAU, SC 89066 BR

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: SAMPAIO, VLADIMIR P  
Address: 19289 DELAWARE CT  
City-St-Zip: BOCA RATON, FL 33434 US

Title: VP (X) Change ( ) Addition  
Name: DOS REIS, MANOEL  
Address: 19289 DELAWARE CT  
City-St-Zip: BOCA RATON, FL 33434 US

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: VLADIMIR SAMPAIO

VP

02/20/2007

Electronic Signature of Signing Officer or Director

Date