## 2007 FOR PROFIT CORPORATION

## FILED Apr 26, 2007 8:00 am Secretary of State

ANNUAL REPORT					,		ary or		ucc
DOCUMENT # P06000073418  1. Entity Name DOUBLE E MARBLE & GRANITE, INC.							7 90225 022 *	***15	0.00
Principal Place of Business 1806 31ST AVENUE VERO BEACH, FL 32960	1806	Mailing Address 1806 31ST AVENUE VERO BEACH, FL 32960			\$008	11111 11111 11111 11111 11111 11111 1111	<b>.</b>		<b>11</b> 1 il 1 <b>19</b> 1
2. Principal Place of Business - No	P.O. Box # 3. Maili	3. Mailing Address							
Suite, Apt. #, etc.	Suite	Suite, Apt. #, etc.			04132007	Chg-P	CR2E034 (1	2/06)	
City & State	City &	City & State			4. FEI Numbe 20–4989			<del></del>	plied For t Applicable
Zip Count	ry Zip		Country		5. Certificate	of Status Desired		<b>5</b> Add Required	
Name and Address of Current Registered Agent			Name		7. Name and	Address of New	Registered Agent		_
DOTY, KEVIN S ESQ. HATCH & DOTY, P.A. 1701 HIGHWAY A1A, SUITE 220 VERO BEACH, FL 32963			Street	Street Address (P.O. Box Number is Not Acceptable)					
			City				FL Z	ip Code	)
8. The above named entity extrinits 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 obtigations of registered agent.  SIGNATUP  Signature, typed or printed name of registered agent and the lipapolicable. [NOTE: Registered Agent signature required when retristating]  PLE NOWILL FEE IS \$150.00  9. Election Campaign Financing  After May 1, 2007 Fee will be \$550.00  1. Trust Fund Contribution. Added to Fees								and accept	
	OFFICERS AND DIRECTOR		11.		ADDITIONS/	CHANGES TO OF	FICERS AND DIRE		
NAME President STREET ADDRESS CITY-S1-ZIP  NAME President Mark E. Es 1806 31st		□ Delete h, FL 32960	TITLE NAME STREET ADDRESS CITY-ST-ZIP				[] C	Change	Addition
CHY-SI-ZIP	spich St, Vero Beach	□ Delete n, FL 3296(	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3				Change	Addition
NAME Laura E. I STREET ADDRESS CITY-ST-ZIP 1806 31st		□ Delete  h, FL 32960	TITLE NAME STREET ADDRESS CITY-ST-ZIP	5				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	5				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	5				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADORES: CITY-ST-ZIP	3				Change	Addition

12. I hereby certify that the information supplied with this filling 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 truetee 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

Date

Descriptions

Date

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