

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000124669

Entity Name: JOFE MARBLE & GRANITE CORP.

FILED
Apr 22, 2008
Secretary of State

Current Principal Place of Business:

669 MACKENZIE CIRCLE
SAINT AUGUSTINE, FL 32092 US

New Principal Place of Business:

7920 MERRILL RD
111
JACKSONVILLE, FL 32277 US

Current Mailing Address:

669 MACKENZIE CIRCLE
SAINT AUGUSTINE, FL 32092 US

New Mailing Address:

7920 MERRILL RD
111
JACKSONVILLE, FL 32277 US

FEI Number: 20-5617951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEAL, BITIA N
669 MACKENZIE CIRCLE
SAINT AUGUSTINE, FL 32092 US

Name and Address of New Registered Agent:

LEAL, BITIA N
7920 MERRILL RD
111
JACKSONVILLE, FL 32277 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:

04/22/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEAL, BITIA N
Address: 669 MACKENZIE CIRCLE
City-St-Zip: SAINT AUGUSTINE, FL 32092 US

Title: VP () Delete
Name: ARISMENDY, LUIS F
Address: 669 MACKENZIE CIRCLE
City-St-Zip: SAINT AUGUSTINE, FL 32092 FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEAL, BITIA N
Address: 7920 MERRILL RD UNIT 111
City-St-Zip: JACKSONVILLE, FL 32277 US

Title: VP (X) Change () Addition
Name: ARISMENDY, LUIS F
Address: 7920 MERRILL RD UNIT 111
City-St-Zip: JACKSONVILLE, FL 32277 FL

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.

SIGNATURE: BITIA N. LEAL

P

04/22/2008

Electronic Signature of Signing Officer or Director

Date