

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000154947

Entity Name: APOS GRANITE INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

4455 E 10 LANE
HIALEAH, FL 33013

New Principal Place of Business:

Current Mailing Address:

4455 E 10 LANE
HIALEAH, FL 33013

New Mailing Address:

FEI Number: 83-0482923

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVERA, AMADO
4455 E 10 LANE
HIALEAH, FL 33013 US

Name and Address of New Registered Agent:

RIVERA, AMADO
2800 SW 7TH ST. APT #302
MIAMI, FL 33135 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: _____

Electronic Signature of Registered Agent

04/30/2009

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RIVERA, AMADO
Address: 4455 E 10 LANE
City-St-Zip: HIALEAH, FL 33013

Title: VP () Delete
Name: REYES, ELIO
Address: 4455 E 10 LANE
City-St-Zip: HIALEAH, FL 33013

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RIVERA, AMADO
Address: 10203 SW 2ND ST.
City-St-Zip: MIAMI, FL 33174

Title: VP (X) Change () Addition
Name: REYES, ELIO
Address: 10203 SW 2ND ST.
City-St-Zip: MIAMI, FL 33174

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: AMADO RIVERA

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date