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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 13 1997 8:00am

Secretary of State

(96/6)

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000011794 (4)

AUSSEM MARBLE AND GRANITE, INC.

Principal Place of Business Mailing Address 2000 DOBBS RD UNIT C 2080 DOBBS RD., #C ST AUGUSTINE FL 32086 ST. AUGUSTINE FL 32086-5139 3a. Date of Last Report 3. Date incorporated or Qualified 12/15/1992 05/01/1996 2. Principal Place of Bus ness 2a. Mailing Address Applied For 59-3157167 Not Applicable 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name AUSSEM, STEPHEN 1609 SAN JOSE FOREST CT. Street Address (P.O. Box Number is Not Acceptable) ST. AUGUSTINE FL 32084 83 84 Zip Code City 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature typed or pentest name of registered agent and tipe if applicable OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ■ DELETE Change Addition 1.16 1.1 TITLE NAME AUSSEM, STEPHEN G 1.2 NAME 1609 SAN JOSE FOREST CT. 1,3 STREET ADDRESS STREET ADORESS ST. AUGUSTINE FL 32084 1.4 CITY-ST-ZIP CITY: ST- ZIE DELETE Change Addition THEF 2.1 TITLE 2.2 NAME NAME 2.3 STREET AODRESS STHEF* ADDRESS 2. 4 CITY-ST-ZIP Cilr-Si DELETE Change Addition 3.1 TITLE 11111 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP City St Change DELETE ___ Addition 4.1 TITLE THE 4 2 NAME MANA 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - SY - ZIP DELETE Change Addition 51 TITLE Till: E NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS OTY-ST-715 5.4 CITY - ST - ZIP DELETE 6.1 TITLE ☐ Change Addition TILL NAME 6.2 NAME STREET ADORESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP CITY-ST 26

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

information andicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an efficiency 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 in Block 12 or Block 13 if changed, or on an attachment with an address.