

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT

1995
5-1-95



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY - 1 PM 3:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000013286 (7)**

1. Corporation Name

THE GREEN MARBLE, INC.

Principal Place of Business

616 E. ATLANTIC BLVD.
POMPANO BEACH FL 33060

Mailing Address

616 E. ATLANTIC BLVD.
POMPANO BEACH FL 33060

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/17/1994

3a. Date of Last Report

4. FEI Number

65-047-65-68

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 2862 NE 17th Ave

2a. Mailing Address

26 2862 NE 17th Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 Pompano Bch FL

27 City & State

28 Pompano Bch FL

24 Zip

25 Country

29 33060

Country

25 Broward

29 Zip

30 Country

30 Broward

9. Name and Address of Current Registered Agent

SHIMKUS, ALBERT
1438 N.E. 28TH COURT
POMPANO BEACH FL 33064

10. Name and Address of New Registered Agent

81 Name
82 Debbie A Dohn
83 Street Address (P.O. Box Number is Not Acceptable)
1443 NE 28th Ct
84 City
Pompano Beach FL
85 Zip Code
33064

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Debbie A Dohn

4/20/95

To produce, type or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when changing)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	MANTIONE, MARY F
STREET ADDRESS	695 NW 38TH AVENUE
CITY ST ZIP	DEERFIELD BEACH FL 33442
TITLE	D
NAME	SHIMKUS, ALBERT
STREET ADDRESS	1438 NE 28TH COURT
CITY ST ZIP	POMPANO BEACH FL 33064
TITLE	D
NAME	DOHN, DEBBIE A
STREET ADDRESS	1643 NE 28TH COURT
CITY ST ZIP	POMPANO BEACH FL 33064
TITLE	D
NAME	WILLIAMS, TAMMARA J
STREET ADDRESS	845 NE 18TH AVENUE STE. 3
CITY ST ZIP	FORT LAUDERDALE FL 33304
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	D	☒ Change ☐ Addition
2. NAME	MANTIONE, MARY F	
3. STREET ADDRESS	3240 SW 4TH ST	
4. CITY ST ZIP	DEERFIELD BEACH FL 33442	
5. TITLE	D	☒ Change ☐ Addition
6. NAME	DOHN, DEBBIE A	
7. STREET ADDRESS	1443 NE 28th Ct	
8. CITY ST ZIP	Pompano Bch FL 33064	
9. TITLE		☒ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY ST ZIP		
13. TITLE		☒ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY ST ZIP		
17. TITLE		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. CITY ST ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Debbie A Dohn

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/95

(305) 742-2664