

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000026963 (6)

1. Corporation Name

C AND C MARBLE & GRANITE, INC.



Principal Place of Business

6110 N.W. 110TH TERRACE
MIAMI FL 33012

Mailing Address

6110 N.W. 110TH TERRACE
MIAMI FL 33012

2. Principal Place of Business

21 1300 W 76 ST
22 Sub: Apt #, etc.

23 City & State
Hialeah FL

24 Zip
33014

25 Country
DADE

2a. Mailing Address

26 1300 W 76 ST
27 Sub: Apt #, etc.

28 City & State
Hialeah FL

29 Zip
33014

30 Country
DADE

3. Date Incorporated or Qualified

04/06/1994

3a. Date of Last Report

02/16/1995

4. FEI Number

65-0482454

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

PEREZ, CARLO
6110 N.W. 110TH TERRACE
MIAMI FL 33012

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 1300 W 76 ST

84 City

Hialeah

FL

85 Zip Code

33014

11. Pursuant to the provisions of Sections 607.0602 and 607.1504, 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 607.0605, Florida Statutes.

SIGNATURE

[Signature]

(Print Name of Agent and address, if other than registered)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE
NAME
D PEREZ, CARLOS
Street Address
6110 N.W. 110 TERRACE
City, St, Zip
MIAMI FL

2. TITLE
NAME
D PEREZ, CYNTHIA V
Street Address
6110 N.W. 110 TERRACE
City, St, Zip
MIAMI FL

3. TITLE
NAME
Street Address
City, St, Zip

4. TITLE
NAME
Street Address
City, St, Zip

5. TITLE
NAME
Street Address
City, St, Zip

6. TITLE
NAME
Street Address
City, St, Zip

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 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 119.07(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Do Not Print #

CR2E034 (12/95)