FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000089531 (5)

MARBLE ENGINEERING, INC.

Principal Place of Business

Mailing Address

5130 NW 17 AVE MIAMI FL 33142 5130 NW 17 AVE MIAMI FL 33142

FILED May 11 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

 Date Incorporated or Qualified 12/05/1994

	Principal Pl	ace of Busin	1055	2a, Mailin	2a, Mailing Address			4. FEI Number			Ap	plied For
21				26	26			65-053726	9		No	t Applicable
22	Suite, Apt. #, etc.			Suite,	Suite, Apt #, etc.			5. Certificate of Sta	tus Desired		\$8.75 / Fee Re	
	City & State				City & State			6. Election Campal	gn Financing		\$5.00	May Be
23				28	28			Trust Fund Contribution Added to Fees				
2	Ip		Country	rtry Zip Co			atry 8. This corporation owes or has paid the current year Intangible					
24		25 29 30			30	Personal Property Tax due June 30. 🔲 Yes 🔲 No						
9. Name and Address of Current Registered Agent								10. Name and Add	ess of New R	egistered	Agent	
8916 N W 112 ST HIALEAH GARDENS FL 33016							81 Name					
							82 Street Address (P.O. Box Number is Not Acceptable)					
							83					
							84 City 85 Zip Code					
						54	FL S Zip Code					
11. Pursuant to the provisions of Soctions 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												
Signature, typod or profed name of registered agent and trin if applicable (NOTE Registered Agent agnature required when reinstating) DATE												
12.			OFFICERS	AND DIRECTORS		13.		ADDITIONS/CHAI	NGES TO OFFI	CERS AN		
TITLE		P			☐ DELETE	1.1 TITLE					Change	Addition
NAME			A, LEONOR			1.2 NAME						Į;
STREE	EY ADDRESS		67TH PL 22			1.3 STREET	ADORESS					Į.
CITY-	ST-ZIP	HIALEA	H FL			1.4 CITY-S	T-ZIP					i
TITLE					DELETE	2.1 TITLE	İ				Change	Addition
NAME	:					2.2 NAME						
STREE	T ADDRESS					2.3 STREET	address					
CITY-	ST-ZIP			· · · · · · · · · · · · · · · · · · ·	· <u> </u>	2. 4 CITY - S	T-ZIP					
TITLE	1				DELETE	3.1 TITLE					Change	Addition
NAME	:					3.2 NAME						1
STREE	ET ADDRESS					3.3 STREET	ADDRESS					
CITY-	ST-ZIP					3.4. CITY-S	T-ZIP					
TITLE	{				DELETE	4.1 TITLE	[]				Change	Addition
NAME	:]					4. 2 NAME						
STREE	ET ADDRESS					4.3 STREET	ADDRESS					
CITY-	ST-ZIP					4.4 CITY - S	T-ZIP					
TITLE					DELETE	5.1 TITLE					Change	Addition
NAME						5.2 NAME						-
STREE	ET ADDRESS					5.3 STREET	ADDRESS					
CITY-	ST-ZIP					54 CTTY-S	T-ZIP					
TITLE					☐ DELETE	6.1 TITLE			. —		☐ Change	Addition
NAME						6.2 NAME						
STREE	ET ADDRESS					6.3 STREET	ADDRESS					}
CITY-	ST-ZIP					6.4 CITY-S	T-ZIP					

4. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual roport or supplemental annual roport 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:

LINE WELL SELLING

X4/15/98-305-693-5150