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

PROFIT CCRPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90004 002 ***300.00

DOCUMENT # P95000006487

T.H. WINSTON GRANITE & MARBLE, INC.

	·								
Principal Place	e of Business	Mailing Address	Mailing Address					14711 1441 1541	
4034 NORTH WASHINGTON BLVD.		4380 INDEPENDENCE COUL	4380 INDEPENDENCE COURT			į			
UNIT #1		UNIT #1		DO NOT WRITE IN THIS SPACE					
SARASOTA FL 34234		US	SARASOTA FL 34234-4711		3. Date Incorporated or Qualifed				
		us				01/25/1995			
a District D	lless of Dusiness	2a. Mailing Address				4. FEI Nu mber	An	p ied For	
	lace of Business	⊢				65-0536590 31-0820700		ot Applicable	
Suite, Art.	# oto	Suite Ant # etc	Suite, Apt. #, etc.			00.00.00000 31 0020700	\$8.75 A		
	m, Gic.		27			5. Certificate of Status Desired	Fee Re		
City & S at	<u> </u>		City & State			6. Election Campaign Financing	\$5.00	May Be	
23			28			Trust Fund Contribution Added to Fees			
Zip	Country	Zip				8. This corporation owes the current year Intangible			
24	25					Personal Property Tax.		[]No	
	9. Name and Add ess of Curr					10. Name and Address of New Registered A	gent		
				81	Name			ì	
MACPHAIL, GORDON				82	Street Add	dress (P.O. Box Number is Not Acceptable)			
	O INDEPENDENCE COURT				Oli Cot 7 to				
	T #1			83					
SAR	rasota fl 34234			84	City		85 Zip (Code	
				04	City	FŁ	03 24	5.700	
11. Pursuant office cr r agent. a	registered agent, or both fin title Sta am familiar with, and accept the othi AUU W	dations of, Section 607.0505, Flor Gordon Ma	utnorized rida Statu ac P h	iby thutes. ai	ie corpora 1, Pr		ment as re	g stered	
	Signature, typed or printed na na of registered a	gent and title if applicable (NOT E		Agent s	signature requi	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	PES IN 12	
12.	, 	DELETE	13.	11 TITLE		ADDITIONS/CHANGES TO OTTICE IS 7 WE	Change	Addition	
TITLE	D MACPHAIL, GORDON		1.2 NAME					_	
NAME	LAND INDEPENDENCE COLIE	эт	1.3 STREET ADDRESS		DODESS				
CARACOTA EL CACCA		11	1.4 CITY-ST-ZIP					-	
CITY-ST-ZIP TITLE	SANASUTA PL 34234	1.4 DELETE 2.1			ZIP		Change	Addition	
		<u> </u>	2.2 NA						
NAME					DDRESS				
STREET ADDRESS			- 6	ITY-ST-					
CITY-ST-ZIP TITLE		DELETE 31		-	· ZIF		Change	Addition	
NAME		—	3 2 NAM					1	
STREET ADDRESS	1		4		DORESS			1	
CITY-ST-ZIP				TY-\$T-				Į.	
TITLE	-	☐ DELETE	4 1 TIT				Change	Addition	
NAME			4. 2 NA	AME					
STREET ADDRESS			4.3 ST	REETA	ODRESS				
CITY-ST-ZIP				TY-ST-2	1				
TITLE		☐ DELETE	5.1 TIT				Change	☐ Addition	
NAME			5.2 NAME						
STREET ADDRESS			5.3 ST	REETA	NDDRESS				
CITY-ST-ZIP				TY-ST-	ZIP			_	
TITLE		☐ DELETE	6.1 TIT	Œ			Change	Addition	
NAME			6.2 NA	ME					
OTDEET ADODE SO	1		6.3 ST	REETA	DDRESS			ľ	

14. I heret y certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0"(3)(i), Florida Statutes. I further pertify 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 the my name appears in Block 12 or Block 13 of change (I, of an an attack mean with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE;

, President