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

Mailing Address

100 W. COLONAL DR.

2a. Mailing Address

ORLANDO FL 32801-1329

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

2. Principal Place of Business

SIGNATURE:

100 W. COLONIAL DR.

ORLANDO FL 32801

21



FLORIDA DEPARTMENT OF STATE

FILED

Feb 14 1997 8:00am

Secretary of State

3a. Date of Last Report

Applied For Not Applicable

04/17/1996

3. Date Incorporated or Qualified

08/30/1995 FEI Number

59-3336876

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000071124 (8)

MYSTIC GRANITE AND MARBLE, INC.

Suite, Apt.	#, etc.	 	Suite, Apt. #, etc.				5. Certificate of Status Desired	
City & Stat	te		City & State				Election Campaign Financing \$5.00 May Be	
23		28	28				Trust Fund Contribution Added to Fees	
Zip	Country	Zıp		Cou	ntry		8. This corporation has liability for intangible tax under s. 199.032,	
				30	,		Florida Statutes Yes No	
	9. Name and Address of Cu	rrent Registered	d Agent				10. Name and Address of New Registered Agent	
ANA ALVAREZ 100 W. COLONIAL AVE. ORLANDO FL 32801					81	Name		
					82	2 Street Address (P.O. Box Number is Not Acceptable)		
					83		:	
			•		84	City	85 Zip Code	
		4500	F00 F1 11 D1 1				FL 8 cp sour	
office or i	registered agent, or both, in the S	State of Florida. S	luch change was a	authorized	d by	the corpor	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered	
agent. Fa	am familiar with, and accept the o	bligations of, Sec	ction 607.0505, Fi	orida Stat	utes	. '	, , ,	
SIGNATURE	Annual Control of Control	d and a self-self-self-self-self-self-self-self-	ALOT	E Denistann	1 4		quited when reinstating) DATE	
12.	Signature, typed or printed name of registered agent and title if applicable (NOTE OF FIGERS AND DIRECTORS			13.	n Mge	m signature rec	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	· · · · · · · · · · · · · · · · · · ·			1.1 TITLE		Change Addition	
NAME	DARLENE SPEZZI			1.2 NA	AME			
STREET ADDRESS	100 W. COLONIAL DR.			1.3 ST	AEET.	ADDRESS		
CITY-ST-ZIP	ORLANDO FL				1.4 CITY+ST-ZIP			
TITLE			DELETE	2.1 Ti			Change Addition	
NAME				2.2 N/	AME			
STREET ADDRESS				2.3 \$1	REET.	ADDRESS		
CITY-ST-ZIP				2.40	ITY-S	T-ZIP	· · · · · · · · · · · · · · · · · · ·	
TITLE			DELETE	3.1 TI	TLE		☐ Change ☐ Addition	
NAME				3.2 N/	AME	İ		
STREET ADDRESS				33\$1	REET	ADDRESS		
CITY-ST-70				3 4. C	ITY-S	T-ZIP		
TITLE			DELETE	4.1 Ti	TLE		☐ Change ☐ Addition	
NAME				4.2 N	AME			
STREET ADDRESS				4.3 S1	TAEET	address		
CITY-ST-ZIP				4.4,CI	TY-S	r-zip	1	
TITLE			[_] DELETE	5.1 Ti	TLE		Change Addition	
NAME				5.2 N/	AME			
STREET ADDRESS)			5.3 S1	TREET	ADDRESS		
CITY-ST-ZIP		······································		5.4 CI		T-ZIP		
TITLE			☐ DELETE	6.1 Tf	TLE		Change Addition	
NAME				6.2 N	AME			
STREET ADDRESS				6.3 S	TREET	ADDRESS		
CITY-ST-ZIP				6.4 CI				
information	on indicated on this annual report	for supplementa	l annual report is :	true and a	accu	irate and th	ited in Section 119.07(3)(i), Florida Statutes. I further certify that the hat my signature shall have the same legal effect as if made under oath; that port as required by Chapter 607, Florida Statutes; and that my name	