## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED May 18, 2001 8:00 am Secretary of State DOCUMENT # P95000096443 MARBLE MEDICAL, INC. 05-18-2001 91567 043 \*\*\*150.00 Principal Place of Business Mailing Address 1951 RAYMOND DIEHL BUSINESS LANE 1951 RAYMOND DIEHL BUSINESS LANE KAADaaaa TALLAHASSEE FL 32308 TALLAHASSEE FL 32308 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3350278 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name AUDIE, JOSEPH J JR. Street Address (P.O. Box Number is Not Acceptable) 1951 RAYMOND DIEHL BUSINESS LANE TALLAHASSEE FL 32308 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. TITLE □ Delete TITLE AUDIE, JOSEPH J JR NAME NAME 1951 RAYMOND DIEHL BUSINESS LANE STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TALLAHASSEE FL Change ☐ Addition ☐ Delete TITLE TITLE NAME DE LAMAR, DEAN O NAME STREET ADDRESS 1951 RAYMOND DIEHL BUSINESS LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TALLAHASSEE FL VILLE PRESIDENT Addition ☐ Change ☐ Delete TITLE TITLE NAME CHARLES LOVELL NAME 1951 RAYMOND BIENL BUSINES LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TANAMASSAT ☐ Change Audition VICE PRESIDENT Delete TITLE TITLE BRADLEY HENOT NAME NAME 195 RAYMAND DIENE BUSINES CHOVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IF 32300 7AUAN9SVE ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-7IP

SR2E034 (10/00)