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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED**

Apr 14 1998 8:00am

Secretary of State

DOCUMENT # P96000019502 (9)

CARRARA MARBLE & GRANITE COMPANY, INC. Principal Place of Business Mailing Address 2097 TRADE CENTER WAY 2097 TRADE CENTER WAY NAPLES FL 33942 NAPLES FL 34109 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>02/29/1996</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0645570 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. Yes Yes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name szepesi, steve 2097 TRADE CENTER WAY 82 Street NAPLES FL 33942 83 84 11. Pursuant to the provisions of Scottons 607,0502 and 6)7,1508, Florida Statutos, 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, an accept the obligations of, Section 607,0505, Florida Statutes. d title it applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIBECTORS IN 12 12. OFFICERS AND DIRLCTORS 13. Addition DELETE Change 1.1 TITLE TITLE SZEPESI, STEVE 1.2 NAME NAME 2097 TRADE CENTER WAY 1.3 STREET ADDRESS STREET ADDRESS NAPLES FL 33942 CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETÉ Addition 2.1 TITLE TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIF DELETE ☐ Change Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIF DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME 4.3 STREFT ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS

14. 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 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 repower 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 adactment with an agriculture.

6.4 CITY-ST-ZIP