2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address 6267 LEE ANN LANE

P96000040927 **DOCUMENT #**

1. Entity Name

Principal Place of Business 6267 LEE ANN LANE

SIGNATURE: 以

MIS

HINTED NAME OF SIGNING OFFICER OR DIRECTOR

GULFCOAST MARBLE & GRANITE, INC.



FILED Jan 16, 2003 8:00 am Secretary of State

01-16-2003 90087 046 ***150.00

COO WE TO

NAPLES FL 3		NAPLES FL 34109 US					
2. Principal P	Place of Business APOUT	3. Mailing Address	> ABOUT	e in restant ein id ind auth auth auth	WEITE BOLDS WINST ANDERN SMITH		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		CHECK HERE IF	MAKING CHANGES		
City & State		City & State		4. FEI Number 65-0660020		oplied For	
Zip	Country	Zip	Country	5. Certificate of Status Desired	S8.75 Add	ditional	
	6. Name and Address of Current R	egistered Agent		7. Name and Address of New Reg	istered Agent		
PEREZ L	AWERENCE		Name 6	Name SAVE AS ABOVE			
PEREZ, LAWERENCE 27657 OLD 41 ROAD			Street Address (P.O. Box Number is Not Acceptable)				
BONITA SPRINGS FL 34135				Cohall			
55/11/1/ 5//11/105 / 25//105				MAC			
	$0 \vee 0$		City		FL Zip Cod	e	
The above the obligat	named entity submits this statement for ions of registered agent.	the purpose of changing its	registered office or registe	ered agent, or both, in the State of Floric	la. I am familiar with,	and accept	
SIGNATURE							
	Signature, typed or printer name of registered agent an	d title #applicable. (NOTE	: Registered Agent signature requin	ed when reinstating)	DATE		
After	ILE NOW!!! FEE IS \$150,00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department of the control of t	State		 Election Campaign Finan Trust Fund Contribution. 	~ <u>~</u> ~~	May Be I to Fees	
10.	OFFICERS AND D	IRECTORS	11.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTOR	S IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	PD Cortes, Servio T JR 6267 Lee ann Lane Naples Fl 34109	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition	
12. I hereby control indicated of the corporate changed,	ertify that the information supplied with the on this report or supplemental reports to coration or the receiver of trustee surpow or on an attachment with an address, with	is filing does not quality of ue and accurate and that me eled to execute this report a hall other like empowered.	the exemption stated in S y signature shall have the s required by Chapter 60	ection 119.07(3)(i), Florida Statutes. I fur same legal effect as if made under oat 7, Florida Statutes; and that my name an	ther certify that the in it that I am an officer opears in Block 10 or	formation or director Block 11 if	