

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

APPROVED  
AND  
FILED

98 APR 30 AM 10:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000015627  
1. Corporation Name  
**MILLENNIUM MARBLE CORPORATION**

Principal Place of Business Mailing Address  
**1466 Rail Head Boulevard  
Naples, Florida 34110**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		2/14/1997	
Suite, Apt. #, etc		Suite, Apt. #, etc		4. FEI Number	
22		27		52-2020439	
City & State		City & State		Applied For	
23		28		Not Applicable	
24	25	29	30	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip		Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24		25		29	
29		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
Damaso W. Saavedra 312 Southeast 17th Street Second Floor Ft. Lauderdale, Florida 34110				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				85 Zip Code			
				FL			

11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, 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, and accept the obligations of, Section 607 0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Director <input type="checkbox"/> DELETE	1.1 TITLE	Assistant Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Diane Shearin	1.2 NAME	Karen B. Rozar
STREET ADDRESS	1466 Rail Head Boulevard	1.3 STREET ADDRESS	1201 Hays Street
CITY-ST-ZIP	Naples, Florida 34110	1.4 CITY-ST-ZIP	Tallahassee, Florida 32301
TITLE	Robert B. Shearin <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Robert B. Shearin	2.2 NAME	
STREET ADDRESS	1466 Rail Head Boulevard	2.3 STREET ADDRESS	200002507112--5
CITY-ST-ZIP	Naples, Florida 34110	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information furnished 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 receiver 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 attachment with an address.

SIGNATURE: *Karen B. Rozar* 4-30-98 850-222-9171

CR2E034 (10/97)



ACCOUNT NO. : 072100000032

REFERENCE : 801915 10321A

AUTHORIZATION : *Patricia Pizzuto*

COST LIMIT : \$ 150.00

ORDER DATE : April 30, 1998

ORDER TIME : 2:08 PM

ORDER NO. : 801915-005

CUSTOMER NO: 10321A

CUSTOMER: Damaso Saavedra, Esq  
Kopelowitz Saavedra & Pelosi,  
2nd Floor  
312 S.e. 17th Street  
Ft. Lauderdale, FL 33316

ANNUAL REPORT FILING

NAME: MILLENNIUM MARBLE CORPORATION

*File First*

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XXX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stacy L Earnest

EXAMINER'S INITIALS:

RECEIVED  
 98 APR 30 PM 4: 04  
 DIVISION OF CORPORATION  
*A. Allen*