## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000037110

FILED Jan 09, 2006 Secretary of State

Entity Name: WEST CENTRAL GRANITE AND MARBLE WORKS, INC.

Current Pr	incipal Place	of Bus	inace:	New Principal Place	of Rusiness
	-	or Du:	micas.	·	
12222 N H <i>I</i> UNIT B	AZEN AVE			12222 N HAZEN AVE THONOTOSASSA, F	
	SASSA, FL 3	3592	US	THONOTOSASSA, T	L 33392 03
Current Mailing Address:				New Mailing Address:	
PO BOX 12	25				
	SASSA, FL 3	3592	US		
FEI Number:	59-3446313	FEIN	umber Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of C	urrent	Registered Agent:	Name and Address	of New Registered Agent:
ROSE, KEI 10101 SKF	TH WLEE ROAD				
	SASSA, FL 3	3592	US		
THONOTO The above				purpose of changing its registere	ed office or registered agent, or both,
THONOTO The above n the State	named entity of Florida.			purpose of changing its register	ed office or registered agent, or both,
THONOTO The above n the State	named entity of Florida.	submits			ed office or registered agent, or both,  Date
THONOTO The above n the State SIGNATUR	named entity: of Florida. RE: Electror	submits nic Sign	this statement for the		
THONOTO The above In the State SIGNATUR Election Carr	named entity: of Florida. RE: Electror	submits nic Sign g Trust F	this statement for the ature of Registered Ag	ent	
THONOTO The above In the State SIGNATUR Election Carr OFFICERS	named entity of Florida.  RE: Electror  apaign Financing  B AND DIREC	submits nic Sign g Trust F	this statement for the ature of Registered Ag	ent	Date
THONOTO The above n the State SIGNATUR Election Carr OFFICERS Title: Name:	named entity of Florida.  RE: Electror  npaign Financing  AND DIRECTOR  P  ROSE, KEITH	nic Sign g Trust F TORS:	ature of Registered Ag	ent  ADDITIONS/CHANG  Title:  Name:	Date  BES TO OFFICERS AND DIRECTOR
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I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEITH ROSE P 01/09/2006