

AMENDED
FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

05-24-2002 91331 034 *****70.00
FILE:LP97000079072

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000079072
1. Entity Name
Interiors Cultured Marble, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1734 Trade Center Way
3. Mailing Address
1734 Trade Center Way
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Naples, FL
Zip
34109
Country
USA
4. FEI Number
59-3466011
Applied For
Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent
Name
David J. Ayotte
Street Address (P.O. Box Number is Not Acceptable)
325 Dunes Blvd.
807
City
Naples
FL
Zip Code
34108

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 David J. Ayotte David J. Ayotte - President 4-30-02
Signature, typed or printed name of registered agent and title if applicable (FOLE: Registered Agent Signature required when necessary) (DATE)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)
January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State
10. Election Campaign Financing ☐ \$5.00 May Be Added to Fees
Trust/Fund Contribution

11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/D/NP/S DAVID J. Ayotte 325 Dunes Blvd # 807 Naples, FL 34108	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DONALD Showens 27731 Harold Street Bonita Springs, FL 34135	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
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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 on an attachment with an address, with all other like empowered.
SIGNATURE David J. Ayotte DAVID J. Ayotte - President 4/30/02 (239) 598-3004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) Daytime Phone #

CR2034B (12/01)