

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90561 017 ***150.00

DOCUMENT # P98000012819

1. Entity Name

PROFESSIONAL STONE AND MARBLE, INC.



Principal Place of Business

3840 E. 8TH LANE
HIALEAH FL 33013

Mailing Address

3840 E. 8TH LANE
HIALEAH FL 33013

24054780



MOORE

CR2E034 (11/03)

2. Principal Place of Business

3840 E 8 Lane
Suite, Apt. #, etc.

3. Mailing Address

3840 E 8 Lane
Suite, Apt. #, etc.

City & State

Hialeah FL
Zip 33013 Country

City & State

Hialeah, FL
Zip 33013 Country

4. FEI Number

65-0811226

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RODOLFO, ALMIRA
3840 E. 8TH LANE
HIALEAH FL 33013

7. Name and Address of New Registered Agent

Name: Rodolfo Almira
Street Address (P.O. Box Number is Not Acceptable)

3840 E 8 Lane

City Hialeah

FL

Zip Code 33013

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Rodolfo Almira

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

02/17/04

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME ALMIRA, RODOLFO
STREET ADDRESS 3840 E. 8TH LANE
CITY-ST-ZIP HIALEAH FL 33013 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rodolfo Almira

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/17/04

Date

(305) 986-7137

Daytime Phone #