## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # **P98000022602** Feb 04, 2000 8:00 am 1. Entity Name Secretary of State R GRANITE & MARBLE FABRICATION, INC. 02-04-2000 90038 028 \*\*\*158.75 Principal Place of Business Mailing Address 715-4 WHITNEY AVE 715-4 WHITNEY AVE LANTANA FL 33462-1669 LANTANA FL 33462 2. Principal Place of Busin DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc Applied For 4. FEI Number 65-0820580 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent YEARWOOD, REGINALD G Street Address (P.O. Box Number is Not Acceptable) 715-4 WHITNEY AVE WhiTNey LANTANA FL 33462 ANTANA 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS PD TITLE Change Addition TITLE **Delete** BALSARA, VICTOR R NAME NAME STREET ADDRESS 715-4 WHITNEY AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LANTANA FL 33462 Change ☐ Addition ☐ Delete TITLE YEARWOOD, REGINALD G NAME 715-1 whiTNEY Ave. STREET ADDRESS STREET ADDRESS 715-4 WHITNEY AVE CITY-ST-ZIP CITY-ST-ZIP LANTANA FL 33462 ☐ Addition ☐ Delete TITLE TITLE LOPEZ, RAMON NAME NAME 715-1 WhiTNEY AUE. STREET ADDRESS 715-4 WHITNEY AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LANTANA FL 33462 ☐ Delete ☐ Addition TITLE TITLE NAME NAME TO . STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 export 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 amounted to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered. SIGNATURE: