2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT

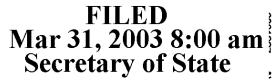
P98000048139

City & State Miami, Florida



1. Entity Name PAVONI MARBLE CORP. Principal Place of Business Mailing Address 14250 SW 166 ST 14250 SW 166ST MIAMI FL 33174 MIAMI FL 33174

2. Principal Place of Business 13284 S.W 120th St. 3. Mailing Address 13284 S.W 120thSt Suite, Apt. #, etc. Suite, Apt. #, etc. City & State : Florida



03-31-2003 90284 008 ***150.00



CHECK HERE IF MAKING CHANGES

65-0839981

Applied For

Not Applicable

4. FEI Number

^{Zip} 33186		Country U.S.A	Zip 33186	Country U.S	. A	5. (Certificate of Status Desired	d 🗆	\$8.75 Add Fee Required		
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent											
PAVONI, PEDRO P 14250 SW 166 ST MIAMI FL 33174						PAVONI, PEDRO P Street_Address (PO. Box Number is Not Acceptable) 13284 S.W 120th St.					
59°				-					Zip Code	9	
<u> </u>					MIAMI 33186					86	
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. Formula Signature Signature											
After Make Check	May 1, 200	! FEE IS \$150.00 03 Fee will be \$550.00 o Florida Department of 9					9. Election Campaign Trust Fund Contribu	_		0 May Be to Fees	
10.	20	OFFICERS AND D		11.		AD	DITIONS/CHANGES TO O	FFICERS A	AND DIRECTORS	3 IN 11	
NAME STREET ADDRESS	PD PAVONI, P 14250 SW MIAMI FL 3	166ST	☐ Delete	TITLE NAME STREET AL CITY-ST-					☐ Change	☐ Addition	
STREET ADDRESS	VPD ALCOLEA, 14215 SW MIAMI FL 3	166 TERR	🔀 Delete	TITLE NAME STREET AD CITY-ST-2	DDRESS		PAVONI S.W 166th St	г.	⊠ i Change	Addition	
TITLE			☐ Delete	TITLE					Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP				STREET AD CITY-ST-7				<u> </u>	<u></u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET AD CITY-ST-2					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET AD CITY-ST-2					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		(□ Delete	TITLE NAME STREET AD CITY-ST-2		·	, , , , , , , , , , , , , , , , , , ,		☐ Change	Addition	
12. I hereby certify that the information supplied with this ling coes 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 about any part 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 great 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 a

SIGNATURE:

(305)256-5657 03/25/03