

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000068495

1. Entity Name

PRIMA MARBLE AND GRANITE FABRICATION INC.

FILED
Apr 21, 2000 8:00 am
Secretary of State

04-21-2000 90161 044 ***150.00

Principal Place of Business

Mailing Address

~~941 S PARK RD~~
~~STE 107~~
~~HOLLYWOOD FL 33021~~

~~941 S PARK RD~~
~~STE 107~~
~~HOLLYWOOD FL 33019-2223~~

2. Principal Place of Business

1307 ROOMAN ST.

Suite, Apt. #, etc.

3. Mailing Address

1307 ROOMAN ST.

Suite, Apt. #, etc.

City & State

HOLLYWOOD, FL.

Zip 33019

Country

BROWARD

City & State

HOLLYWOOD, FL.

Zip 33019

Country

BROWARD

4. FEI Number

65-0856998

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SALEMI, MARCO
1005 NW 155TH TERR
PEMBROKE PINES FL 33028

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1307 ROOMAN STREET

City

HOLLYWOOD

FL

Zip Code

33019

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	SALEMI, MARCO	
STREET ADDRESS	941 S PARK RD STE 107	
CITY-ST-ZIP	HOLLYWOOD FL 33021	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	1307 ROOMAN STREET	
CITY-ST-ZIP	HOLLYWOOD, FLORIDA 33019	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

SIGNATURE:

Signature of Marco Salemi, Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/12/2000 941/929-8582

Daytime Phone #

CR2E034 (9/99)