

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 05, 2000 8:00 am
Secretary of State

04-05-2000 90084 006 ***150.00

DOCUMENT # P99000045863

1. Entity Name

GRANDEUR MARBLE & GRANITE, INC.

Principal Place of Business

Mailing Address

9384 S.E. COVE POINT ST.
TEQUESTA FL 33469

9384 S.E. COVE POINT ST.
TEQUESTA FL 33469-1313

2. Principal Place of Business

3. Mailing Address

9384 SE Cove Pt St.

9384 SE Cove Pt St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Tequesta, FL

Tequesta, FL

Zip

Country

Zip

Country

33469

USA

33469

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TRAINA, LORETTA
9384 S.E. COVE POINT ST.
TEQUESTA FL 33469

Name

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

City

FL

Zip Code

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: DP ☐ Delete
NAME: TRAINA, FELIX
STREET ADDRESS: 9384 S.E. COVE POINT ST.
CITY-ST-ZIP: TEQUESTA FL 33469

TITLE: ☒ Change ☐ Addition
NAME:
STREET ADDRESS: 254 Village Blvd. Apt. #4202
CITY-ST-ZIP: Tequesta, FL 33469

TITLE: DT ☐ Delete
NAME: TRAINA, LORETTA
STREET ADDRESS: 9384 S.E. COVE POINT ST.
CITY-ST-ZIP: TEQUESTA FL 33469

TITLE: ☒ Change ☐ Addition
NAME:
STREET ADDRESS: 254 Village Blvd Apt #4202
CITY-ST-ZIP: Tequesta, FL 33469

TITLE: DS ☐ Delete
NAME: CULLEN, LORI
STREET ADDRESS: 9384 S.E. COVE POINT ST.
CITY-ST-ZIP: TEQUESTA FL 33469

TITLE: ☒ Change ☐ Addition
NAME:
STREET ADDRESS: 4085-A Woodsege Cir.
CITY-ST-ZIP: Palm Beach Gardens, FL 33410

TITLE: V ☐ Delete
NAME: CULLEN, MARK S
STREET ADDRESS: 4085-A WOODSEGE CIR.
CITY-ST-ZIP: PALM BEACH GARDENS FL 33410

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

☐ Change ☐ Addition

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ Change ☐ Addition

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

☐ Change ☐ Addition

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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:

Lori Cullen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/29/00 (561)863-7501

CR2E034 (9/99)