

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

1-1-08  
**FILED**  
Jan 31, 2008 08:00 AM  
Secretary of State

DOCUMENT # P99000089264

1. Entity Name  
GRANITE BY US CORPORATION



Principal Place of Business  
4636 NW 74TH AVENUE  
MIAMI, FL 33166

Mailing Address  
4636 NW 74TH AVENUE  
MIAMI, FL 33166



01032008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0973885	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

BARBOSA, ANDREIA  
21010 NE 24TH COURT  
N MIAMI BEACH, FL 33180

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

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

(NOTE: Registered Agent signature required when replacing)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	BARBOSA, ANDREIA
STREET ADDRESS	4636 NW 74TH AVENUE
CITY- ST- ZIP	MIAMI, FL 33166
TITLE	DV
NAME	BARBOSA, ALEXANDER
STREET ADDRESS	46.6 NW 74TH AVENUE
CITY- ST- ZIP	MIAMI, FL 33166
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

U000000808441  
02/07/08-80034-025 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-08

Date

305-640-9744

Daytime Phone #