2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 23, 2007 08:00 Al Secretary of State

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DOCUMENT # V68613										ıaı y	oi Sta
1. Entity Name DR. MARBLE, INC.											
DR. WAR	<i>,</i> .	-									
	•										
Principal Place of Business Mailing Address											
14365 SW 139TH CT 14635 SW 139TH CT 14635 SW 139TH CT MIAMI, FL 33186 US MIAMI, FL 33186 US											
MIAMI, FL 3	13186 US)		MIAMI, FL 33186	US		1				
										HANDA AND AND AND	
Principal Place of Business - No P.O. Box # 3. Mailing Address								3			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			04202007	Cha D	CD2E0	24 (42(06)	
0: 20				0.000				Chg-P	CRZEU	34 (12/06)	
City & State			ì	City & State			4. FEI Numbe				oplied For ot Applicable
Zip	Country			Zip Cour		ntry			8.75 Add		
		4.0.44					<u> </u>			ee Require	
6. Name and Address of Current Registered Agent						Name	7. Name and	Address of New F	Registered A	gent	
CAMPILLO, VICENTE						Charles Addresses	/D.O. Pau Numb	- in Niet A - notebl			
│ 14365 SW 139TH CT │ MIAMI, FL 33186						Street Address	(P.O. BOX NUMB	er is Not Acceptabl	e)		
	. 55155										
						City			FL	Zip Cod	e
8. The above	named ontity	y submits this sta	atement for the	purpose of changing its	register	l red office or registe	red agent, or bot	h, in the State of Fl		l amiliar with.	and accept
the obligat	tions of regist	ered agent.			-	-					, i
SIGNATURE											
	5:gnature, typed	or printed name of regis	sterod agent and till	e if applicable (NO	E: Registers	ed Agent signature require	d when reinstating)		DATE		
FIL	E NOWIII	FEE IS \$150	0.00	9. Election Campa	ign Final	ncing \$5	.00 May Be				
After M	ay 1, 2007	7 Fee will be	\$550.00	Trust Fund Con	tribution.	☐ Add	ded to Fees				~
10.		OFFICE	ERS AND DIRE	CTORS	11.		ADDITIONS/	CHANGES TO OFF	ICERS AND	DIRECTORS	S IN 11
TITLE	P De				TITL					Change	Addition
NAME STREET ADDRESS	CAMPILLO, VICENTE 14365 SW 139TH CT				NAM STRI	AE Eet address		U00	0000725	527	
CITY-ST-ZIP	MIAMI, FL 33186					(-ST-ZIP		05/03/	(07-800	126-008	3 150.0þ
TITLE	VP			☐ Delete	TITL	E				Change	Addition
NAME STREET ADDRESS	MARTINEZ, MARK 17935 SW 138TH CT				NAM						
CITY-ST-ZIP	MIAMI, FL 33177					EET ADDRESS (- St- Zip					
TITLE		÷		☐ Delete	TITL	£				☐ Change	Addition
NAME					NAM						
STREET ADDRESS CITY-ST-ZIP					•	eft address (-St-7 P	,	.,			
TITLE				☐ Delete	TITL					☐ Change	Addition
NAME				_ 55.0.5	NAM	tÉ.					_
STREET ADDRESS CITY-ST-ZIP						eet address ,` '-st-zip					
TITLE				☐ Delete	TITL	 			· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
NAME	į			LL Delete	NAM					c.ia.igo	
STREET ADDRESS						EET ADDRESS					
CITY+ST-ZIP						'-ST-ZIP				Channa	Addition
NAME.				☐ Delete	TITLI N a m					☐ Change	☐ Addition
STREET ADDRESS						EFT ADDRESS					
CITY-ST-ZIP		//				-ST-ZIP					
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplied with this filling does not qualify for the exemptions 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 of pustee emphasized 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 of pustee emphasized 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 of pusteen 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 of pusteen 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 of pusteen 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 of pusteen 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 of the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of the corporation of the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of the same legal effect as if the same legal eff											
or the cor changed,	poration or the or on an atta	ne receiver of trus nchment with an e	stee emplowers aptdress, with a	ther like empowered	as requi	red by Chapter 607	7, Florida Statute I	s; and that my nam	e appears in	Block 10 or	Block 11 if
CICHAT		1/1/1/	1.1.	4	}	•	4/,	an/om	ر مرد سر	てっつつ	.000
SIGNATURE: 1/20/2007 305-256-5580 SIGNATURE AND TYPEDOOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Data Daylinia From #											, 2)OO