

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90231 022 ***158.75

DOCUMENT # P03000056171 1. Entity Name PRESTIGE ARCHITECTURAL STONE, INC.					
Principal Place of Business 23261 WATERCIRCLE BOCA RATON, FL 33486				Mailing Address 23261 WATERCIRCLE BOCA RATON, FL 33486	
2. Principal Place of Business 116 NE 27 STREET Suite, Apt. #, etc.		3. Mailing Address 116 NE 27 STREET Suite, Apt. #, etc.		94074529 	
City & State MIAMI, FL		City & State MIAMI, FL		4. FEI Number 35-2205797	
Zip 33137		Country USA		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MACINTER CORPORATION 5440 N SR 7 STE 218 FT LAUDERDALE, FL 33319				7. Name and Address of New Registered Agent Name SANDRA P. CASTRO Street Address (P.O. Box Number is Not Acceptable) 116 NE 27 STREET City MIAMI FL Zip Code 33137	
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 <i>Sandra P. Castro</i> 4/23/2004 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CASTRO, SANDRA 23261 WATERCIRCLE BOCA RATON, FL 33486	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CASTELLANOS, JOSE 23261 WATERCIRCLE BOCA RATON, FL 33486	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLANCO, LAZARO R 23261 WATERCIRCLE BOCA RATON, FL 33486	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			
12. 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-10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Sandra P. Castro</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			PRESIDENT SANDRA CASTRO		
			4/23/2004 (305) 576-6373 Date Daytime Phone #		