

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 22, 1999 8:00 am
Secretary of State

02-22-1999 90026 001 ***150.00

02-46631

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000060060

1. Corporation Name
EXCELLENCE IN STONE, INC.

Principal Place of Business 12248 SOUTH WEST 131 AVENUE MIAMI FL 33186	Mailing Address 12248 SOUTH WEST 131 AVENUE MIAMI FL 33186
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1654 NW 108 AVENUE Suite, Apt. #, etc. 22 MIAMI, FL 33172 City & State 23 Zip 24 Country 25 U.S.A	2a. Mailing Address 26 1654 NW 108 AVE Suite, Apt. #, etc. 27 City & State 28 MIAMI, FL Zip 29 33172 Country 30
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3. Date Incorporated or Qualified 08/03/1995	4. FEI Number 65-0606908	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent

EVANS, JAMES C ESQ.
CATLIN, SAXON, TUTTLE AND EVANS, P.A.
169 E. FLAGLER STREET, SUITE 1700
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	FL
83	
84 City	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P <input type="checkbox"/> DELETE
NAME	AMIR, AWAL
STREET ADDRESS	7380 SW 122 ST
CITY-ST-ZIP	MIAMI FL 33156
TITLE	VP <input checked="" type="checkbox"/> DELETE
NAME	ALBURY, JOHN
STREET ADDRESS	3801 NE 2 AVE
CITY-ST-ZIP	MIAMI FL 33137
TITLE	ST <input type="checkbox"/> DELETE
NAME	MOHAMMED, FAAJZADEH
STREET ADDRESS	12840 SW 148 ST RD
CITY-ST-ZIP	MIAMI FL 33183
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	HQJAT FARAJZADEH
1.3 STREET ADDRESS	7380 SW 96 ST
1.4 CITY-ST-ZIP	MIAMI, FL 33156
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] DATE: **1/5/99** DAYTIME PHONE #: **(305) 716-2827**

CR2E034 (11/98)