

2000 UNIFORM BUSINESS REPORT (UBR)

1062

DOCUMENT # P96000075495
 1. Entity Name
IMPERIAL STONE, CORP.

Principal Place of Business Mailing Address

17630 NW 67th Ave. 17630 NW 67th Ave.
 Suite #1210 Suite #1210
 Miami Lakes, FL Miami Lakes, FL
 33015 US 33015 US

FILED
 00 SEP 25 AM 10:18
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number Applied For (Not Applicable)

65-0692239

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Espinoza, Julio C
 17630 NW 67th Avenue
 Suite #1210
 Miami Lakes, FL 33015

7. Name and Address of New Registered Agent

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 (If FEI: Registered Agent signature required when consolidating) 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

TITLE	DPD <input type="checkbox"/> Delete
NAME	Espinoza, Julio C
STREET ADDRESS	17630 NW 67th Avenue #1210
CITY-STATE-ZIP	Miami Lakes, FL 33015
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

400003416304
 10/06/00 01024 01
 ****150.00 ****150

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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (If FEI: Date)

KE

20f2

September 20, 2000

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

Re: Imperial Stone, Corp.
Doc. #P96000075495
2000 Uniform Business Report

The above referenced corporation did not receive the 2000 UBRs on a timely basis. Enclosed is a check in the amount of \$150.00 representing the original filing fee. This corporation cannot afford to stay in business should it be paying any additional penalties. We respectfully request that you accept the \$150 to keep this corporation active and apologize for any inconvenience we have caused.

Sincerely,

Julio Espinoza