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

PROFIT CORPORATION **ANNUAL REPORT**

1997

Principal Place of Business



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 541539 **EPOXY STONE, INCORPORATED**

(3)

Mailing Address

FILED Apr 28 1997 8:00am Secretary of State



25275 CARNOUSTIE COURT. S.E. BONITA SPRINGS FL 33923		25275 CARNOUSTIE COURT. S.E. BONITA SPRINGS FL 34135-7644				
					3. Date Incorporated or Qualified 07/27/1977	3s. Date of Last Report 04/29/1996
2. Principal P	lace of Business	2a. Mailing Address			4, FEI Number	Applied For
21		26		59-1760693	Not Applicable	
Suite, Apt. #, etc.		Suite, Apl. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State 23		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 34135 Country 25		Z(p)	Country 30		8. This corporation has liability for intangible tax under s. 199.032. Florida Statutes Yes X No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent
OBERSTAR, MARIE				81 Name		
	5 Carnoustie Ct., se Ita springs fl 33923			2 Street Ad	idress (P.O. Box Number is Not Acceptable)	
			6	3		
			6	4 City		FL 85 Zip Code
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was	authorized	by the corpo	orporation submits this statement for the p ration's board of directors. I hereby accep	urpose of changing its registered
SIGNATURE	Signature, typed or printed name of registered ages	Long Island and called the IRC	VIC. Description of P	and eigenburg to	pulsed when existations	DATE
12.	Signature, typed or printed name or registered agos OFFICERS AND		13.	igeni signature re	quired when reinstating) ADDITIONS/CHANGES TO OFFIC	
TITLE	Р	DELETE	1.1 1111	· · · · · · · · · · · · · · · · · · ·		Cnange
NAME	OBERSTAR, MARIE		1.2 NAM	E		·
STREET ADDRESS	25275 CARNOUSTIE CT SE		1.3 STRE	F1 ADDRESS		34135
CITY-ST-ZIP	BONITA SPRINGS, FL 00000		1.4 CBY	- S1 - ZIP		-
TITLE	VP	☐ DELETE	2.1 TITE	:		☐ Change ☑ Addilion
NAME	OBERSTAR, ANDREA		2.2 NAM	i		
STREET ADDRESS	25275 CARNOUSTIE CRT BONITA SPRINGS FL			ET ADDRESS		34135
CITY-ST-ZIP TITLE	ST ST	☐ DELETE	2. 4 CIT	(· \$1 - ZIP		Change Addition
NAME	OBERSTAR, ANDREW		3.2 NAM			
STREET ADDRESS	25275 CARNOUSTIE CRT		1	ET ADDRESS		A.11.
CITY-ST-ZIP	BONITA SPRINGS FL		3.4 CIT	/- S1-ZIP		34135
TITLE		DELETE	4.1 701L			Change Addition
NAME			4. 2 NAM	ME .		
STREET ADDRESS			4.3 \$TR	ET ADDRESS		
CITY-ST-ZIP		T priess		- S1 - ZIP		1 0t 1 1100
TITLE		☐ DELETE	5.1 TITL			Change Addition
NAME			5.2 NAV			
STREET ADDRESS				ET ADDRESS		
CATY-ST+ZIP TITLE		DELETE	5.4 CITY 6.1 TITL	- \$1 - ZIP		Change Addition
NAME		_ Senie	6.2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-ST-7IP				- S1 - 7IP		

14. I do 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 eath; 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