

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003378

FILED
Mar 28, 2005
Secretary of State

Entity Name: STONE HOUSE OF MAX SCHUSTER, INC.

Current Principal Place of Business:

336 WEST PASSAIC STREET
ROCHELLE PARK, NJ 076623027

New Principal Place of Business:

Current Mailing Address:

336 WEST PASSAIC STREET
ROCHELLE PARK, NJ 076623027

New Mailing Address:

FEI Number: 13-1950071

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YUDKOWITZ, LEONARD
36 N.E. 1ST STREET
SUITE 361
MIAMI, FL 33132 US

Name and Address of New Registered Agent:

YUDKOWITZ, LEONARD
36 N.E. 1ST STREET
SUITE 329
MIAMI, FL 33132 US

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: LENORD YUDKOWITZ

03/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHUSTER, MAX
Address: 336 WEST PASSAIC STREET
City-St-Zip: ROCHELLE PARK, NJ 076623027

Title: V () Delete
Name: SCHUSTER, RICHARD
Address: 336 WEST PASSAIC STREET
City-St-Zip: ROCHELLE PARK, NJ 076623027

Title: S () Delete
Name: SCHUSTER, ELI
Address: 336 WEST PASSAIC STREET
City-St-Zip: ROCHELLE PARK, NJ 076623027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELI SCHUSTER

S

03/28/2005

Electronic Signature of Signing Officer or Director

Date