

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91348 046 ***150.00

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DOCUMENT # **F01000004665**

1. Entity Name
INTERNATIONAL STONE SOURCE INC.



Principal Place of Business
**5510 SW 41 BLVD., SUITE 201
GAINESVILLE FL 32608**

Mailing Address
**5510 SW 41 BLVD., SUITE 201
GAINESVILLE FL 32608**



2. Principal Place of Business
7250 S.E. 246 Terrace
Suite, Apt. #, etc.

3. Mailing Address
7250 S.E. 246 Terrace
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State
Hawthorne Florida

City & State
Hawthorne Florida

4. FEI Number **62-1856303**

Applied For
 Not Applicable

Zip Country
32640 Abchua

Zip Country
32640 Alachua

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HILL, MELISSA
9028 SW 100 TERR.
GAINESVILLE FL 32608**

Name **Melissa Hill**
Street Address (P.O. Box Number is Not Acceptable)
7250 S.E. 246 Terrace
City **Hawthorne** FL Zip Code **32640**

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
NAME **CP WARDEN, BRIAN**
STREET ADDRESS **3476 HIGHWAY 11 SOUTH**
CITY-ST-ZIP **RICEVILLE TN 37370**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME **VCS REAUME, THOMAS J**
STREET ADDRESS **49732 MARIN DRIVE**
CITY-ST-ZIP **WIXUM MI 48393**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME **V HILL, MELISSA**
STREET ADDRESS **5510 SW 41 BLVD.**
CITY-ST-ZIP **GAINESVILLE FL 32608**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: **Melissa Hill**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/03 352-481-3777
Date Daytime Phone #

CR2E034 (10/02)