

4-30-97 B 5884 C  
FILE NOW: FILING FEE AFTER MAY 1 IS \$5500

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. North  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

Apr 30 1997 8:00am  
Secretary of State

DOCUMENT # F94000004665 (5)

1. Corporation Name

STONE PANEL, S.A., CORPORATION



Principal Place of Business

C/O JUANA I. DE CASTILLA  
NO. 60  
MADRID, SPAIN

Mailing Address

C/O JUANA I. DE CASTILLA  
NO. 60  
MADRID, SPAIN

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Coy

29 30

3. Date Incorporated or Qualified

09/09/1994

3a. Date of Last Report

04/23/1996

4. FEI Number

65-0520668

Applied For

X Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

KUPFER, LAWRENCE M  
C/O KUPFER, KUPFER & SKOLNICK, P.A.  
1700 UNIVERSITY DRIVE  
CORAL SPRINGS FL 33071

10. Name and Address of New Registered Agent

1 Name

2 Street Address (P.O. Box Number is Not Acceptable)

3 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the ~~we~~-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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

NAME PASCUAL, JUAN V  
STREET ADDRESS 11846 HIGHLAND PLACE  
CITY-ST-ZIP CORAL SPRINGS FL 33071

1.2 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.3 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.4 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.5 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.6 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 ☐ Change ☐ Addition

1.2 ☐ Change ☐ Addition

1.3 ☐ Change ☐ Addition

1.4 ☐ Change ☐ Addition

1.5 ☐ Change ☐ Addition

1.6 ☐ Change ☐ Addition

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 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.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/97

(954) 7559104

Daytime Phone #

0529240

CR2E034 (9/96)