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

2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

F9900001023 **DOCUMENT #**

HEARTHS	STONE G.P. INC.				04-28-2003 912	421 OI / · · · 130.	.00
Principal Place of Business 3663 N. SAM HOUSTON PARKWAY EAST SUITE 600 HOUSTON TX 77032		Mailing Address 3663 N. SAM HOUSTON PARKWAY EAST SUITE 600 HOUSTON TX 77032					
2. Principal Place of Business		3. Mailing Address				8 111 88 111 88181 11811 8811	{
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES		
City & State		City & State			4. FEI Number 76-0417130	⊢	pplied For ot Applicable
. · Zip Country		Zip	Country		5. Certificate of Status Desired	S8.75 Ad	
	6Name and Address of Current Re	gistered Agent 	·	~~ f.	7. Name and Address of New Reg	istered Agent	
			Name			<u></u>	
CAPITOL CORPORATE SERVICES, INC.				,			
1333 NORTH DUVAL STREET				Street Address (P.O. Box Number is Not Acceptable)			
TALLAHASSEE FL 32303					· · · · · · · · · · · · · · · · · · ·		
			<u> </u>				
			City			FL Zip Coo	de
	named entity submits this statement for titions of registered agent.	he purpose of changing its	registered office or	registered	agent, or both, in the State of Florid	a. I am familiar with	, and accept
	·						ł
SIGNATURE	Signature, typed or printed name of registered agent and	title if applicable. (NOT	E: Registered Agent signat	ure required wh	nen reinstating)	DATE	
	ILE NOW!!! FEE IS \$150.00	-					
			9. Election Campaign Finance	cing \$5.0)0 May Be		
	r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of S	State			Trust Fund Contribution.	Adde	d to Fees
10.	OFFICERS AND DI		111,		ADDITIONS/CHANGES TO OFFICE	DO AND DIDECTOR	OC INI 11
TITLE	DP ·	Delete	TITLE		ADDITIONS/CHANGES TO OFFICE	Change	Addition
NAME	HEKKER, TIMOTHY P	□ Delete	NAME			Change	Addition
STREET ADDRESS	3663 N. SAM HOUSTON PARKWAY	/ EAST, STE, 600	STREET ADDRESS	ĺ			
CITY-ST-ZIP	HOUSTON TX 77032		CITY-ST-ZIP				
TITLE	DVS	Delete	TITLE			☐ Change	Addition
NAME	ROSENBERG, RICHARD M	C Delete	NAME			onanga	
STREET ADDRESS	3663 N. SAM HOUSTON PARKWAY	/ EAST, STE. 600	STREET ADDRESS				
CITY-ST-ZIP	HOUSTON TX 77032	•	CITY-\$T-ZIP				
TITLE	V	☐ Delete	TITLE		AND THE STATE OF T	Change	Addition
NAME	DASPIT, LAURENCE		NAME				
STREET ADDRESS	3663 N. SAM HOUSTON PARKWAY	/ EAST, STE. 600	STREET ADDRESS	j			J
CITY-ST-ZIP	HOUSTON TX 77032		CITY-ST-ZIP				
TITLE	DV	☐ Delete	TITLE			☐ Change	Addition
NAME	WANG, JAMES	/ FAOT OTF	NAME				
STREET ADDRESS	3863 N. SAM HOUSTON PARKWAY	EASI, SIE. 600	STREET ADDRESS				
CITY-ST-ZIP	HOUSTON TX 77032	_ _	CITY-ST-ZIP				
TITLE	ACPIET TTOAD	☐ Delete	TITLE			☐ Change	☐ Addition
NAME STREET ADDRESS	SCHILL, LLOYD 3663 N. SAM HOUSTON PARKWAY	LAGT STE SUU	NAME CTREET ADDRESS				
STREET ADDRESS	HOUSTON TX 77032	L731, 31E, 000	STREET ADDRESS				
CITY-ST-ZIP	10001011 17 77032		CITY-ST-ZIP	<u> </u>			
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition
NAMÉ			NAME				

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

78-227-460Z

Daytime Phone #