Indegraf Place of Business       Methog Address         1006 SPRIAL ILL IVE       IDDS SPRIAL ILL DR         Som And LT, Basso       Sama Address         2. Principal Place of Business       3. Methog Address         Suite, Ar, etc.       Suite, Art, etc.         City & State       City & State         ZP       Country         State, Art, etc.       Suite, Art, etc.         ZP       Country         ZP       Country         ZP       Country         ZP       Country         State, Address of Deve Registered Agent       RXX Spatagenet         De MARA, JAMES W.       State Address of New Registered Agent         Hubbone ramed antity submit bit statement for the purpose of changing its registered agent, or both, in the State of Porce, L an familar with, and accept the obligators of registered agent.         MCMMTHE       2000 Key Based Sec Obleck Payeble to Forcida Department of the purpose of changing its registered agent, or both, in the S	2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) DOCUMENT # H23121 1. Entity Name BLUE STONE ENTERPRISES, INC.					May 01, 2003 8:00 am Secretary of State 05-01-2003 90135 048 ***158.75				
	1036 SPRING HILL DRIVE SPRING HILL FL 34608		11036 Spring Hill Dr. Spring Hill FL 34608	<b></b>						
City & State City	Principal Place of Bus	iness	3. Mailing Address			<b>       </b>		101 (IBI 0101) BIUI	I BIBII <b>B</b> IBIE	INTE PROJECTION
Zip         Country         Zip         Country         Los Age/searce           2ip         Country         2ip         Country         5. Certificate of Status Desired         EXX         \$8,75         Additional Precipital           0.< Name and Address of Current Registered Agent	Suite, Apt. #, etc. Suite, Apt. #		Suite, Apt. #, etc.	pt. #, etc.						
ZP       Country       ZD       Country       5. Certificate of Status Desired       XXX \$\$37.75 Additional Face Required         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered Agent       Name       Name         DE MARIA, JAMES W.       1564 DON2 DRIVE       Name       Name       Name       Name         DE MARIA, JAMES W.       1564 DON2 DRIVE       Street Address (PO. Box Number is Net Acceptable)       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. Lam familiar with and accept the obligators of registered agent.         GNATURE       Expension foreign information of registered agent.       OUTIC       PL       Zip Code         After May 1, 2003 Pee will be \$\$50.00       After May 1, 2003 Pee will be \$\$50.00       9. Election Campaign Financing       \$\$5.00 May Ba         After May 1, 2003 Pee Will be \$\$50.00       11.       ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 11       Outility of the state of Plange I Addition         North Check Payabilis to Florida Department of State       11.       ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 11       Change I Addition         North Registered Agent       Ortificer Addition Max       Intel Addition Max       Intel Addition       Change I Addition         North Registered Agent Agents       Ortificered Agent Addition Max       Intel Additicere<	City & State		City & State							
E. Name and Address of Current Registered Agent     T. Name and Address of New Registered Agent     Name     Statu DONZI DRIVE     HUDSON FL 34667     City     FL     City     City     FL     City	Zip	Country	Zip	Count	ry	5. Certificat	e of Status Desired	KXX \$		
DE MARIA, JAMES W. 15641 DONZ) DRIVE HUDSON FL 34667       Street Address (P.O. Box Number is Not Adceptable)         City       FL       Zip Code         City       FL       Zip Code         In the above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Lam familiar with, and accept the abligations of registered agent.       In the State of Florida. Lam familiar with, and accept the abligations of registered agent.         IGNATURE       State Mark 1, 2003 Fee will be 550.00 After May 1, 2003 Fee will be 550.00 Af	6. Nam	e and Address of Current	Registered Agent	_l		7. Name an	d Address of New F			
City         FL         Zip Code           The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Lam familiar with, and accept the obligations of registered agent.         If a comparison of the state of Florida. Lam familiar with, and accept the obligations of registered agent.           IGNATURE         Image: state dagent.         If a comparison of the state of Florida. Lam familiar with, and accept the obligations of registered agent.         If a comparison of the state of Florida. Lam familiar with, and accept the obligations of registered agent.           IGNATURE         Image: state dagent.         Ima	DE MARIA, JAMES W. 15641 DONZI DRIVE			-	Name				<u>.</u>	
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ILE PV DEMARIA, JAMES W. AME DEMARIA, JAMES W. PRET ADORESS IS641 DONZI DRIVE HUDSON FL UDSON FL ILE S DEMARIA, DEBORAH IREE ADORESS DEMARIA, DEBORAH IREE ADORESS IS641 DONZI DRIVE HUDSON FL ILE DEMARIA, DEBORAH INAME IREE ADORESS IS641 DONZI DRIVE INTLE INTLE INAME IREE ADORESS IS641 DONZI DRIVE INTLE INTLE INTLE INTLE INAME IREE ADORESS IS641 DONZI DRIVE INTLE INTLE INTLE INAME IREE ADORESS IS641 DONZI DRIVE INTLE INTLE INAME IREE ADORESS IS641 DONZI DRIVE INTLE INTLE INTLE INAME IREE ADORESS IS641 DONZI DRIVE INTLE INTL	FILE NOW	111 FEE IS \$150.00	and title if applicable. (NC	)TE: Hegistered	Agent signature required					
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