

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90584 026 ****50.00

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DOCUMENT # L01000016829

1. Entity Name

STONE ETCHINGS, LLC



Principal Place of Business

7911 NW 72ND AVE.
PMB 105-60
MEDLEY FL 33166

Mailing Address

7911 NW 72ND AVE.
PMB 105-60
MEDLEY FL 33166

2. Principal Place of Business

4409 NE 5th TERRACE
Suite, Apt. #, etc.

3. Mailing Address

4409 NW 5th TERRACE
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State
OAKLAND PARK FL

Zip
33334

Country
USA

City & State
OAKLAND PARK FL

Zip
33334

Country
USA

4. FEI Number 65-1147419

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

NATURMAN, STEVEN H
9130 SOUTH DADELAND BLVD.
SUITE 150
MIAMI FL 33156

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
SOOKNARINE, ROGER
7911 NW 72ND AVE.
MEDLEY FL 33166 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
JEROME, KYMBERLAND
7911 NW 72ND AVE.
MEDLEY FL 33166 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
MURPHY, RACQUEL
7911 NW 72ND AVE PMB 105-60
MEDLEY FL 33166 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SAME
4409 NE 5th TERRACE
OAKLAND PARK FL 33334 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SAME
4409 NE 5th TERRACE
OAKLAND PARK FL 33334 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SAME
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OAKLAND PARK FL 33334 ☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Racquel T. Murphy

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/21/03

Date

954-351-5564

Daytime Phone #

CR2E083 (10/02)