


FILED
Apr 15, 2008 8:00 am
Secretary of State

04-15-2008 90117 028 ***138.75

2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L06000118934			
1. Entity Name STONE TRADITIONS INTERNATIONAL, LLC			
Principal Place of Business 6541 NW 87TH AVE MIAMI, FL 33178		Mailing Address 6541 NW 87TH AVE MIAMI, FL 33178	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent IGLESIAS, MARIO A ESQ 350 EAST LAS OLAS BLVD STE 1600 FT LAUDERDALE, FL 33301		7. Name and Address of New Registered Agent Name CORP DIRECT AGENTS, INC. Street Address (P.O. Box Number is Not Acceptable) 515 EAST PARK AVE City TALLAHASSEE FL 32301	
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 <u>Katie Wonsch, Asst. Sec.</u> DATE <u>2/25/08</u> <small>Signature, typed or printed name of registered agent and if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR BOSS, MARCEL 6541 NW 87TH AVE MIAMI, FL 33178 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR FILADELFIA, ANTHONY 6541 NW 87TH AVE MIAMI, FL 33178 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>[Signature]</u>		02/25/08 756 412 515	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #	

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STONE TRADITIONS INTERNATIONAL, LLC



Principal Place of Business
6541 NW 87TH AVE
MIAMI, FL 33178

Mailing Address
6541 NW 87TH AVE
MIAMI, FL 33178

ATTACHMENT

60023747

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02122008

Chg-LLC

CR2E083 (12/06)

City & State

City & State

4. FEI Number

71-1018534

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

IGLESIAS, MARIO A ESQ
350 EAST LAS OLAS BLVD STE 1600
FT LAUDERDALE, FL 33301

7. Name and Address of New Registered Agent

Name
CORP DIRECT AGENTS, INC.

Street Address (P.O. Box Number is Not Acceptable)
515 EAST PARK AVE

City

TALLAHASSEE

FL

Zip Code
32301

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SIGNATURE:

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

Date

Daytime Phone #

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