2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 25, 2008
Secretary of State

DOCUMENT# L07000018990

Entity Name: CR STONE WORKS LLC

Current Principal Place of Business:

6190 NW 173 STREET
608
MIAMI, FL 33015

New Principal Place of Business:

347 CITY VIEW DRIVE
FORT LAUDERDALE, FL 33311

Current Mailing Address:

6190 NW 173 STREET
608
MIAMI, FL 33015

New Mailing Address:

347 CITY VIEW DRIVE
FORT LAUDERDALE, FL 33311

FEI Number: 20-8488240 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RODRIGUEZ, MARIANO
6190 NW 173 STREET
608
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

RODRIGUEZ, MARIANO
347 CITY VIEW DRIVE
FORT LAUDERDALE, FL 33311 US

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.

SIGNATURE: MARIANO RODRIGUEZ 02/25/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: RODRIGUEZ, MARIANO
Address: 6190 NW 173 STREET APT 608
City-St-Zip: MIAMI, FL 33015

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: PRES (X) Change ( ) Addition
Name: RODRIGUEZ, MARIANO
Address: 347 CITY VIEW DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33311 US

Title: VP ( ) Change (X) Addition
Name: FRAYSSINET, JEAN P
Address: 347 CITY VIEW DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33311 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: MARIANO RODRIGUEZ P 02/25/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date