04/26/2005 TUE 09:33 FAX

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State
04-28-2005 90169 049 ***150.00

14003502

04262005 Chg-P CR2E034 (10/03)

DOCUMENT # P01000061985

1. Entity Name
WORLD STONE SOURCE, INC.

Principal Place of Business
~~2288 NW 30 PLACE~~
~~POMPANO BEACH, FL 33069~~

Mailing Address
~~2288 NW 30 PLACE~~
~~POMPANO BEACH, FL 33069~~

2. Principal Place of Business
3139 North Andrews Ave EXT
Suite, Apt. #, etc.
Pompano Beach FL
33064
Country

3. Mailing Address
3139 North Andrews Ave EXT
Suite, Apt. #, etc.
Pompano Beach FL
33064
Country

4. FEI Number
65-1113024
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
DuBrow Duker + Associates PA
5401 N. University Drive Suite 204
Coral Springs FL 33067

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] 4/26/05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P ☐ Delete
NAME	VADACCHINO, FIORE
STREET ADDRESS	~~2288 NW 30 PLACE~~
CITY-ST-ZIP	POMPANO BEACH, FL ~~33069~~
TITLE	V ☐ Delete
NAME	PANZERA, JOE
STREET ADDRESS	~~2288 NW 30 PLACE~~
CITY-ST-ZIP	POMPANO BEACH, FL ~~33069~~
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	☒ Change ☐ Addition
NAME	
STREET ADDRESS	3139 North Andrews Ave EXT
CITY-ST-ZIP	Pompano Beach FL 33064
TITLE	☒ Change ☐ Addition
NAME	
STREET ADDRESS	3139 North Andrews Ave EXT
CITY-ST-ZIP	Pompano Beach FL 33064
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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.

SIGNATURE: [signature] April 26 2005 954-978-0877
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FIORE VADACCHINO