


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2004 8:00 am
Secretary of State

03-22-2004 90041 031 ***150.00

DOCUMENT # P01000074750	
1. Entity Name PREMIER STONE GALLERY, INC	

Principal Place of Business 10945 ULMERTON RD LARGO, FL 33778	Mailing Address 1422 HARBOR HILLS DR LARGO, FL 33770
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2. Principal Place of Business 1422 HARBOR HILLS DR	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State LARGO FLORIDA	City & State
Zip 33770	Country USA



03182004 Chg-P CR2E034 (10/03)

4. FEI Number 59-3737610	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	
SHAW, WILLIAM B JR 18395 GULF BLVD #203 INDIAN SHORES, FL 33785	

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 re-registering) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPC NEW, DAVID 1422 HARBOR HILLS DR LARGO, FL 33770 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: David N. New **DAVID NEW** 3/18/04 727-585-2452
Signature and typed or printed name of signing officer or director Date Daytime Phone #