

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90640 035 ***150.00

DOCUMENT # P01000089131

1. Entity Name
SOUTH TRADING & GRANITES, INC



Principal Place of Business

**14707 S DIXIE HWY
SUITE 316
MIAMI, FL 33176**

Mailing Address

**14707 S DIXIE HWY
SUITE 316
MIAMI, FL 33176**

14001010



2. Principal Place of Business

**14707 S. Dixie Hwy
Suite 313**

3. Mailing Address

**14707 S. Dixie Hwy
Suite 313**

04082004

Chg-P

CR2E034 (10/03)

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

65-1139115

Applied For

Not Applicable

Zip

33176

Country

USA

Zip

33176

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

**QUINTANA, CARLOS E
14707 S DIXIE HWY
SUITE #316
MIAMI, FL 33176**

7. Name and Address of New Registered Agent

Name **QUINTANA, CARLOS E**

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

14707 S. DIXIE HWY

Suite # 313

City **Miami**

FL

Zip Code

33176

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

x Carlos E. Quintana

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

(NOTE: Registered Agent signature required when reinstating)

04-08-04

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME **QUINTANA, CARLOS** ☐ Delete
STREET ADDRESS **9125 SW 77TH AVE APT 607A**
CITY-ST-ZIP **MIAMI, FL 33156**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

TITLE ☐ Change ☐ Addition
NAME
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:

x Carlos E. Quintana

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-08-04

Date

786-293-9333

Daytime Phone #