

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000049054

Entity Name: BY THE STONES, INC.

FILED  
Jan 07, 2005  
Secretary of State

## Current Principal Place of Business:

2160 NE 162ND ST.  
NORTH MIAMI BEACH, FL 33162

## New Principal Place of Business:

## Current Mailing Address:

2160 NE 162ND ST.  
NORTH MIAMI BEACH, FL 33162

## New Mailing Address:

FEI Number: 47-0865918

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TSIMOGIANNIS, JOHNNY  
999 PONCE DE LEON BLVD  
SUITE 601  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

WERBLE, STEVEN  
300 NW 70TH AVE.  
SUITE 200  
PLANTATION, FL 33317 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: MICHELLE STONE

01/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: STONE, MARY  
Address: 21150 POINT PLACE, SUITE 301  
City-St-Zip: AVENTURA, FL 33180

Title: VTD ( ) Delete  
Name: STONE, MICHELLE  
Address: 21150 POINT PLACE, SUITE 301  
City-St-Zip: AVENTURA, FL 33180

Title: SD ( ) Delete  
Name: STONE, JOANNE  
Address: 21150 POINT PLACE, SUITE 301  
City-St-Zip: AVENTURA, FL 33180

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SR (X) Change ( ) Addition  
Name: STONE, MARY  
Address: 21150 POINT PLACE, SUITE 1504  
City-St-Zip: AVENTURA, FL 33180

Title: PD (X) Change ( ) Addition  
Name: STONE, MICHELLE  
Address: 21150 POINT PLACE, SUITE 1504  
City-St-Zip: AVENTURA, FL 33180

Title: VTD (X) Change ( ) Addition  
Name: STONE, JOANNE  
Address: 21150 POINT PLACE, SUITE 1504  
City-St-Zip: AVENTURA, FL 33180

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHELLE STONE

PD

01/07/2005

Electronic Signature of Signing Officer or Director

Date