

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000079934

FILED
Jul 02, 2004
Secretary of State

Entity Name: STONE & CABINETS PLUS, INC.

Current Principal Place of Business:

4455 SW 160TH AVE., APT. 103
MIRAMAR, FL 33027

New Principal Place of Business:

1790 N POWERLINE #5
POMPAÑO BEACH, FL 33069

Current Mailing Address:

4455 SW 160TH AVE., APT. 103
MIRAMAR, FL 33027

New Mailing Address:

1790 N POWERLINE #5
POMPAÑO BEACH, FL 33069

FEI Number: 20-0404742

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIBERTY BUSINESS SERVICES, INC.
8202 NW 103RD ST.
HIALEAH GARDENS, FL 33016 US

Name and Address of New Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE RD
POMPAÑO BEACH, FL 33064 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: TAX HOUSE CORPORATION

07/02/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GONZALEZ, SAUL
Address: 4455 SW 160TH AVE., APT. 103
City-St-Zip: MIRAMAR, FL 33027

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GONZALEZ, SAUL
Address: 2874 SW 183RD AVE
City-St-Zip: MIRAMAR, FL 33029

Title: PV () Change (X) Addition
Name: LIN, STEVE K
Address: 10600 NW 29TH MANOR
City-St-Zip: SUNRISE, FL 33322

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: SAUL GONZALEZ

PD

07/02/2004

Electronic Signature of Signing Officer or Director

Date