

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000108223

Entity Name: PRO CAST STONE, INC.

FILED
May 28, 2004
Secretary of State

Current Principal Place of Business:

2199 PONCE DE LEON BOULEVARD
SUITE 301
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2199 PONCE DE LEON BOULEVARD
SUITE 301
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 80-0077917

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART AGENT SERVICES
2199 PONCE DE LEON BOULEVARD
SUITE 301 - MERRICK PLAZA
CORAL GABLES, FL, FL 33134

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RODRIGUEZ, OTONIEL
Address: 1344 S. W. 173 WAY
City-St-Zip: PEMBROKE PINES, FL 33029

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: RODRIGUEZ, ADELAIDE VP
Address: 1344 SW 173 WAY
City-St-Zip: PEMBROKE PINES, FL 33029

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: ADELAIDE RODRIGUEZ

VP

05/28/2004

Electronic Signature of Signing Officer or Director

Date