(810)-124 6805

2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED

2007 FEB 28 AM 11:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 06-07

DOCUMENT # P03000153368

1. Entity Name
DESOUZA'S THREE STONES, INC.

Principal Place of Business	Mailing Address
1817 STERLING PALMS CT. APT 104 BRANDON, FL 33511	1817 STERLING PALMS CT. APT 104 BRANDON, FL 33511

02272007 REIN-P CR2E098 (1/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
94 Trista Terrace ct	94 Trista Terrace Ct
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Destin, FL	City & State: Destin FL
Zip: 32541 Country: USA	Zip: 32541 Country: USA

4. FEI Number: 20-0508921 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DESOUZA, JURACY F
1817 STERLING PALMS CT.
APT 104
BRANDON, FL 33511

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
94 Trista Terrace ct

City Destin FL FL Zip Code 32541

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: JURACY F. DESOUZA 02-27-07
Signature, type or print name of registered agent, and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $700.00

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DESOUZA, JURACY F 1817 STERLING PALMS CT., #104 BRANDON, FL 33511	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 94 Trista Terrace Ct Destin FL 32541
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 600092349506 03/13/07--01018--007 **300.00
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JURACY F. DESOUZA 02-27-07 8502461407
Signature and typed or printed name of individual and capacity or position here Date Daytime Phone #

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