

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000005506

Entity Name: DRAGON'S STONE INC

FILED
May 04, 2007
Secretary of State

Current Principal Place of Business:

623 NE 4TH ST
HALLANDALE, FL 33009 US

Current Mailing Address:

623 NE 4TH ST
HALLANDALE, FL 33009 US

New Principal Place of Business:

2445 SW 18TH TERR
1009
FORT LAUDERDALE, FL 33315 US

New Mailing Address:

2445 SW 18TH TERR
1009
FORT LAUDERDALE, FL 33315 US

FEI Number: 72-1577173 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRAGHICI, ARISTIDI
623 NE 4TH ST
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

DRAGHICI, ARISTIDI
2445 SW 18TH TERR
1009
FORT LAUDERDALE, FL 33315 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: DRAGHICI ARISTIDI

05/04/2007

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: P () Delete
Name: DRAGHICI, ARISTIDI
Address: 623 NE 4TH ST
City-St-Zip: HALLANDALE, FL 33009 US

Title: P (X) Delete
Name: DRAGHICI, ARISTIDI
Address: 623 NE 4TH ST
City-St-Zip: HALLANDALE, FL 33009 US

Title: P (X) Delete
Name: DRAGHICI, ARISTIDI
Address: 623 NE 4TH ST
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Name: DRAGHICI, ARISTIDI
Address: 623 NE 4TH ST
City-St-Zip: HALLANDALE, FL 33009 US

Title: P (X) Delete
Name: DRAGHICI, ARISTIDI
Address: 623 NE 4TH ST
City-St-Zip: HALLANDALE, FL 33009 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DRAGHICI, ARISTIDI
Address: 2445 SW 18TH TERR #1009
City-St-Zip: FORT LAUDERDALE, FL 33315 US

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DRAGHICI ARISTIDI

P

05/04/2007

Electronic Signature of Signing Officer or Director

Date