

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 21, 2005 8:00 am
Secretary of State

04-21-2005 90251 021 ***150.00

DOCUMENT # **P040000016401**

1. Entity Name



Stone Detail, Inc.

DO NOT WRITE IN THIS SPACE

50041623

2. Principal Place of Business

1942 Dana Drive

Suite, Apt. #, etc.

3. Mailing Address

1942 Dana Drive

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Fort Myers, Florida

Zip
33907

Country

US

City & State

Fort Myers, Florida

Zip
33907

Country

US

4. FEI Number

42-1616542

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name **Vladimir Gonzalez**

Street Address (P.O. Box Number is Not Acceptable)
2604 45 Street SW

City **Lehigh Acres**

FL

Zip Code

33971

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Vladimir Gonzalez President 4/19/05

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State.

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **President / Secretary / Treasurer**
NAME **Vladimir Gonzalez**
STREET ADDRESS **2604 45 Street SW**
CITY-ST-ZIP **Lehigh Acres, FL 33971**

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**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE:

Vladimir Gonzalez

4/19/05

239-850-4874

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)