

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000021182

Entity Name: M&R STONE CRAFTERS, INC.

FILED
Aug 01, 2006
Secretary of State

Current Principal Place of Business:

1593 SE VILLAGE GREEN DRIVE
PORT ST LUCIE, FL 34952

New Principal Place of Business:

1593 SE VILLAGE GREEN DRIVE
PORT ST LUCIE, FL 34952 US

Current Mailing Address:

1593 SE VILLAGE GREEN DRIVE
PORT ST LUCIE, FL 34952

New Mailing Address:

1593 SE VILLAGE GREEN DRIVE
PORT ST LUCIE, FL 34952 US

FEI Number: 20-0653709

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AAA PERFECT BOOKKEEPING CO., INC.
4735 SE WINTER HAVEN COURT
STUART, FL 34997 US

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

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: RODRIGUES, MOACIR
Address: 4601 NW BROWNELL TERRACE
City-St-Zip: PORT ST. LUCIE, FL 34983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MOACIR RODRIGUES

PRES

08/01/2006

Electronic Signature of Signing Officer or Director

Date