

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000055347

FILED
Feb 08, 2005
Secretary of State

Entity Name: CLASSIC ARCHITECTURAL STONE INC.

Current Principal Place of Business:

692 W. 29TH ST.
#9
HIALEAH, FL 33012

New Principal Place of Business:

5129 STACY ST.
WEST PALM BEACH, FL 33417

Current Mailing Address:

692 W. 29TH ST.
#9
HIALEAH, FL 33012

New Mailing Address:

5129 STACY ST.
WEST PALM BEACH, FL 33417

FEI Number: 20-0945687

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE LA PRESILLA, CESAR
692 W. 29TH ST.
#9
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

DE LA PRESILLA, CESAR
5129 STACY ST.
WEST PALM BEACH, FL 33417 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: CESAR DE LA PRESILLA

02/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: DE LA PRESILLA, CESAR
Address: 692 W. 29TH ST.
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: DE LA PRESILLA, CESAR
Address: 5129 STACY ST.
City-St-Zip: WEST PALM BEACH, FL 33417

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: CESAR DE LA PRESILLA

PSTD

02/08/2005

Electronic Signature of Signing Officer or Director

Date