2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000094779

8421 N. ORANGEVIEW AVE.

TAMPA,, FL 33617

Address: City-St-Zip:

FILED Jun 04, 2007 Secretary of State

Entity Name: MIKE'S STUCCO AND STONE INC **Current Principal Place of Business: New Principal Place of Business:** 8421 N. ORANGEVIEW AVE. TAMPA,, FL 33617 **Current Mailing Address: New Mailing Address:** 8421 N. ORANGEVIEW AVE. TAMPA,, FL 33617 FEI Number: 20-1269214 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WALDEN LAKE BUSINESS SERVICES INC CONTRACTORS NOTICING SERVICES INC 304 E. BAKER STE. 103 E. DR. MARTIN LUTHER KING BLVD. STE D PLANT CITY,, FL 33563 US PLANT CITY., FL 33563 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: DAVID DURLAND 06/04/2007 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition GIBSON, MICHAEL R SR. Name: Name: 8421 N. ORANGEVIEW AVE Address: Address: City-St-Zip: TAMPA, FL 33617 City-St-Zip: Title: VΡ Title: () Delete (X) Change () Addition GIBSON, BILLY JOE CRAWFORD, JOHN Name: Name: 8421 N. ORANGEVIEW AVE. 8421 N. ORANGEVIEW AVE. Address: Address: TAMPA,, FL 33617 TAMPA,, FL 33617 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition GIBSON, JAMES Name: Name:

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.

Address:

City-St-Zip:

Ρ SIGNATURE: MICHEAL GIBSON 06/04/2007