

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000164971

FILED
Feb 15, 2005
Secretary of State

Entity Name: POWERSTONE INDUSTRIES CORPORATION

Current Principal Place of Business:

34125 U.S. HIGHWAY 19 NORTH
SUITE 200
PALM HARBOR, FL 34683

New Principal Place of Business:

1287 E. NEWPORT CENTER DRIVE
SUITE 202
DEERFIELD BEACH, FL 33442

Current Mailing Address:

34125 U.S. HIGHWAY 19 NORTH
SUITE 200
PALM HARBOR, FL 34683

New Mailing Address:

2315 BENT TREE RD.
APT. 2115
PALM HARBOR, FL 34683

FEI Number: 51-0531237

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GRAVES, AARON D
2315 BENT TREE RD, #2115
PALM HARBOR, FL 34683 US

Name and Address of New Registered Agent:

GRAVES, AARON D
2315 BENT TREE RD
APT. 2115
PALM HARBOR, FL 34683 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:

02/15/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GRAVES, AARON D
Address: 34125 U.S. HIGHWAY 19 NORTH
City-St-Zip: PALM HARBOR, FL 34683

Title: VST () Delete
Name: GRAVES, DEBRA R
Address: 34125 U.S. HIGHWAY 19 NORTH
City-St-Zip: PALM HARBOR, FL 34683

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: GRAVES, AARON D
Address: 2315 BENT TREE RD, #2115
City-St-Zip: PALM HARBOR, FL 34683

Title: VS (X) Change () Addition
Name: GRAVES, DEBRA R
Address: 2315 BENT TREE RD., #2115
City-St-Zip: PALM HARBOR, FL 34683

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: AARON D. GRAVES

PT

02/15/2005

Electronic Signature of Signing Officer or Director

Date