

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000010253

Entity Name: COLISEUM STONE CORP.

FILED
Aug 31, 2009
Secretary of State

Current Principal Place of Business:

597 S W FAIRWAY AVENUE
PORT SAINT LUCIE, FL 349832905

New Principal Place of Business:

597 SW FAIRWAY AVENUE
PORT SAINT LUCIE, FL 34983

Current Mailing Address:

597 S W FAIRWAY AVENUE
PORT SAINT LUCIE, FL 349832905

New Mailing Address:

597 SW FAIRWAY AVENUE
PORT SAINT LUCIE, FL 34983

FEI Number: 20-2195211

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1100 S FEDERAL HWY
DEERFIELD BEACH, FL 33441 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: PD () Delete
Name: SILVA, JOSE A
Address: 597 SW FAIRWAY AVENUE
City-St-Zip: PORT ST. LUCIE, FL 349832905

Title: VP () Delete
Name: SILVA, HELENA C
Address: 597 SW FAIRWAY AVENUE
City-St-Zip: PORT ST. LUCIE, FL 349832905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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.

SIGNATURE: JOSE SILVA

PD

08/31/2009

Electronic Signature of Signing Officer or Director

Date