


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2007 8:00 am
Secretary of State

07-11-2007 90074 016 ***150.00

DOCUMENT # P05000060264 1. Entity Name AMERICAN DREAM STONEWORKS INC	
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Principal Place of Business 3233 33RD AVE NO ST PETERSBURG, FL 33713	Mailing Address 3233 33RD AVE NO ST PETERSBURG, FL 33713
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

6. Name and Address of Current Registered Agent HOWELL, FRANCES A 3233 33RD AVE NO ST PETERSBURG, FL 33713

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	DV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Additi
NAME	HOWELL, RYAN J	NAME	
STREET ADDRESS	4750 6TH AVE NO	STREET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG, FL 33713	CITY-ST-ZIP	
TITLE	DP <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Additi
NAME	HOWELL, FRANCES A	NAME	
STREET ADDRESS	3233 33RD AVE NO	STREET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG, FL 33713	CITY-ST-ZIP	
TITLE	DS <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Additi
NAME	LEON, BRUCE F	NAME	
STREET ADDRESS	7930 SUN ISLAND DRIVE #109	STREET ADDRESS	
CITY-ST-ZIP	S. PASADENA, FL 337074461	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Additi
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
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NAME		NAME	
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NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

Frances A Howell 7/3/07

40124170



07042007 Chg-P CR2E034 (12/06)

4. FEI Number **20-2732359 20-2752359** Applied For
Not Applicab

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required