

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 30, 2007 8:00 am
Secretary of State

08-30-2007 90002 031 ***150.00

DOCUMENT # P06000028523 1. Entity Name TRADITIONAL STONE USA INC					
Principal Place of Business 1572 ORTEGA AVENUE DELTONA, FL 32738			Mailing Address 1572 ORTEGA AVENUE DELTONA, FL 32738		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt., etc. 770 Courtland Blvd		Suite, Apt., etc. 770 Courtland Blvd			
City & State Deltona FL		City & State Deltona FL			
Zip 32738		Country USA		4. FEI Number 20-4389645	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent RODRIGUEZ, JOSE L 1572 ORTEGA AVENUE DELTONA, FL 32738			7. Name and Address of New Registered Agent Name Jose L. Rodriguez Street Address (P.O. Box Number is Not Acceptable) 770 Courtland Blvd City Deltona FL Zip Code 32738		
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 <i>Jose Rodriguez</i> 8/20/2007 (Signature of individual or printed name of corporation and holder of authority) (Signature of Registered Agent required if not a shareholder)					
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$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.			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE VP NAME LA ROSA, ROBERTO STREET ADDRESS PO BOX 391623 CITY, ST, ZIP DELTONA, FL 32739	☒ Delete		TITLE Suylen Rodriguez NAME 770 Courtland Blvd STREET ADDRESS Deltona FL 32738 CITY, ST, ZIP Title VP.	☐ Change ☒ Addition	
TITLE P NAME RODRIGUEZ, JOSE LUIS STREET ADDRESS PO BOX 391623 CITY, ST, ZIP DELTONA, FL 32739	☐ Delete		TITLE Jose Luis Rodriguez NAME 770 Courtland Blvd STREET ADDRESS Deltona FL 32738 CITY, ST, ZIP Title P/owner	☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition	
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.					
SIGNATURE: <i>Jose Rodriguez</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			8/20/2007 Date		