2007 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 29, 2007 8:00 am **Secretary of State DOCUMENT # P06000076178** 1. Entity Name 01-29-2007 90071 022 ***158.75 P&L STONE, INC Principal Place of Business Mailing Address 3050 MARTIN ST 3050 MARTIN ST ORLANDO, FL 32806 ORLANDO, FL 32806 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (12/06) 01252007 Chg-P Applied For City & State EEI Number City & State Not Applicable Zip Country \$8.75 Additional Zip Country Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name TRIMINO, PEDRO Street Address (P.O. Box Number is Not Acceptable) 3050 MARTIN ST ORLANDO, FL 32806 Zip Code City 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 (NO1E: Registered Agent signature required when reinstaung) Signature, typed or printed name of registerod agent and title if applicable, \$5.00 May Be 9. Election Campaion Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Addition ☐ Defete TITLE Change TITLE TRIMINO, PEDER TRIMINO, PEDRO NAME 3044 MARTIN ST STREET ADDRESS STREET ADDRESS 3050 MARTIN ST 32806 CITY-ST-ZIP ORLANDO, FL 32806 CITY-ST-ZIP VP Delete TITLE TITLE BLANCO, LEANDRO NAME 3050 MARTIN ST STREET ADDRESS STREET ADDRESS CTTY-ST-ZIP ORLANDO, FL 32806 CITY ST-7IP ☐ Addition ☐ Delete TITLE Change | TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition TITLE Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST 7IP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP OTTY ST 7IP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP

12. I hereby certify that the information supplied with this filling 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 deelever 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 accress, with all other like empowered.

1/25/09

PH: 321-948-8051

FILED