2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## Mar 27, 2008 08:00 A Secretary of State **DOCUMENT # P06000105082** NATURAL STONE COLLECTION, INC. Principal Place of Business Mailing Address 445 STAN DR 445 STAN DR MELBOURNE, FL 32904 MELBOURNE, FL 32904 03132008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-5374107 Not Applicable \$8.75 Additional 5. Certificate of Status Desired $\Box$ I MEN LIVE OF CONTRACTORS Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE MEDINA, YESID 445 STAN DR IN THIS SPACE MELBOURNE, FL 32904 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 little if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Ba FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS **PVST** TITLE MEDINA, YESID NAME STREET ADDRESS 445 STAN DR #1 04/10/08-80033-02 MELBOURNE, FL 32904 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-71P 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 additional statute. changed, or on an attachmer

RWIED NAME OF HIGHING OFFICER OR DIRECTOR

**FILED** 

Daylone Phyne #