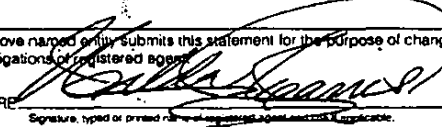
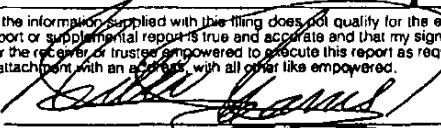


2008 FOR PROFIT CORPORATION ANNUAL REPORT

7/6

FILED
Aug 25, 2008 8:00 am
Secretary of State

07-30-2008 90028 010 ***150.00

DOCUMENT # P07000052724 1. Entity Name HARRIS LAPIDARY SERVICES, INC.																													
Principal Place of Business 1111 EUCLID AVENUE SARASOTA, FL 34237			Mailing Address 10904 8TH AVENUE EAST BRADENTON, FL 34212																										
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																											
City & State Zip Country		City & State Zip Country		4. FEI Number 20-8947783																									
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable																									
6. Name and Address of Current Registered Agent SMITH, KATHERINE L. 715 N. WASHINGTON BLVD SUITE B SARASOTA, FL 34236			7. Name and Address of New Registered Agent Name Hilda Harris Street Address (P.O. Box Number is Not Acceptable) 10904 8th Avenue East City Bradenton FL Zip Code 34212																										
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:  DATE: _____ Signature, typed or printed name of registered agent is acceptable. (NOTE: Registered Agent signature required when renewing)																													
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008		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 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">TITLE</td> <td style="width:65%;">NAME</td> <td style="width:20%; text-align: right;">Delete ☐</td> </tr> <tr> <td>NAME</td> <td>HARRIS, HILDA</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>10904 8TH AVENUE EAST</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>BRADENTON, FL 34212</td> <td></td> </tr> </table>			TITLE	NAME	Delete ☐	NAME	HARRIS, HILDA		STREET ADDRESS	10904 8TH AVENUE EAST		CITY-ST-ZIP	BRADENTON, FL 34212		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">TITLE</td> <td style="width:65%;">NAME</td> <td style="width:20%; text-align: right;">Change ☐ Addition ☐</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	NAME	Change ☐ Addition ☐	NAME			STREET ADDRESS			CITY-ST-ZIP		
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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 recorder 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:  Date: _____ Daytime Phone #: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																													

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07242008 Chg-P CR2E034 (12/06)