

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000034049

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Entity Name:** NATURAL STONE MOTIF, INC.

**Current Principal Place of Business:**

309 ALTAMONTE COMMERCE BLVD.  
SUITE 1504  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

870 SUNSHINE LANE  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

309 ALTAMONTE COMMERCE BLVD.  
SUITE 1504  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

870 SUNSHINE LANE  
ALTAMONTE SPRINGS, FL 32714

**FEI Number:** 26-2258305

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CRUZADA, KRISTOPHER M  
189 S ORANGE AVE STE 1800  
ORLANDO, FL 32801 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: UNSWORTH, PEGGY  
Address: 245 WOODLAKE WAYSIDE  
City-St-Zip: ORLANDO, FL 34677

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: PEGGY UNSWORTH

PD

02/09/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date