FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS P93000002637 (5) DOCUMENT #

SUPERIOR	STONE.	INC.
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Principal Place of Business

Corporation Name

2165 AVOCADO AVE. MELBOURNE FL 32935

2. Principal Place of Business

Suite, Apt. #, etc.

SUITE 200

City & State

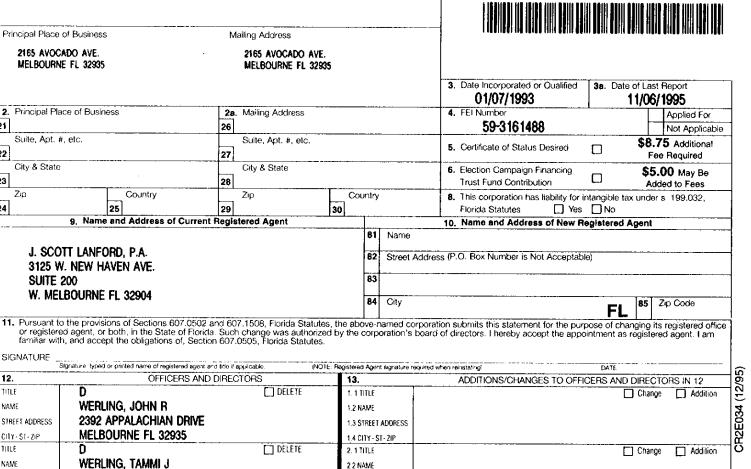
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SIGNATURE Signature typed or printed name of registered agent and title if applicable 12. TITLE D WERLING, JOHN R NAME 2392 APPALACHIAN DRIVE STREET ADDRESS **MELBOURNE FL 32935** CITY - ST - ZIP D TITLE NAME WERLING, TAMMI J 2 2 NAME 2392 APPALACHIAN DRIVE STREET ADDRESS 2.3 STREET ADDRESS **MELBOURNE FL 32935** CITY-ST-ZIP 24 CITY-ST-ZIP TITLE DELETE 3 1 TITLE Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 33 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP TITLE DELETE 4 1 TITLE ☐ Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 City-St-ZiP DELETE TIFLE Addition 5. 1 TITLE Change NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS C-TY-ST-ZIP 5.4 CITY - ST - ZIP TITLE ■ DELETE 6. 1 TITLE Change Addition NAM: 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CHY-ST-ZIP 6.4 CITY - ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I arm 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

eff tammi Werling 416/96 407-242-8070