

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000002637 (5)

1. Corporation Name
SUPERIOR STONE, INC.



Principal Place of Business: 750 WASHBURN Rd. MELBOURNE, FL. 32934
Mailing Address: 750 WASHBURN Rd. MELBOURNE, FL 32934

2. Principal Place of Business: 750 Washburn Rd.
2a. Mailing Address: 750 Washburn Rd.
23. City & State: Melbourne, Fl.
24. Zip: 32934
25. Country: Brazil
26. City & State: Melbourne, Fl.
27. Zip: 32934
29. Country: Brazil

3. Date Incorporated or Qualified: 01/07/1993
3a. Date of Last Report: 04/22/1996
4. FEI Number: 59-3161488
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
J. SCOTT LANFORD, P.A.
3125 W. NEW HAVEN AVE.
SUITE 200
W. MELBOURNE FL 32904

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> DELETE
NAME	WERLING, JOHN R
STREET ADDRESS	2392 APPALACHIAN DRIVE
CITY-ST-ZIP	MELBOURNE FL 32935
TITLE	D <input type="checkbox"/> DELETE
NAME	WERLING, TAMMI J
STREET ADDRESS	2392 APPALACHIAN DRIVE
CITY-ST-ZIP	MELBOURNE FL 32935
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	142-B VERSAILLES DR.
1.4 CITY-ST-ZIP	MELBOURNE BEACH, FL 32951
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	142-B VERSAILLES DR.
2.4 CITY-ST-ZIP	MELBOURNE BEACH, FL 32951
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: John R. Werling Date: 4/30/97 Daytime Phone #: 407-242-8070

CR2E034 (9/96)