FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

ANNUAL REPORT
1995

ACCEPTED AND FILED
95 MAR -1 PM 4:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000055145 (5)

1. Corporate Name
STONE MASTERS OF FLORIDA, INC.

Principal Place of Business	Mailing Address
6587 66 AVE N PINELLAS PARK FL 34665	6587 66 AVE N PINELLAS PARK FL 34665

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 08/02/1993
3a. Date of Last Report: 10/04/1994

2. Principal Place of Business
21 4200-32 Avenue No.
22 Suite, Apt. #, etc.
23 City & State: St.Petersburg, FL
24 Zip: 33713
25 Country: USA

2a. Mailing Address
26
27 Suite, Apt. #, etc.
28 City & State
29 Zip
30 Country

4. FEI Number: 59-3210275
☐ Applied For
☐ Not Applicable

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

ZEOLI, SAM JR
6587 66 AVE N
PINELLAS PARK FL 34665

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 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: Sam Zeoli,Jr. 01-11-95
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '95	
01	D	11 TITLE	☐ Change ☐ Addition
02	ZEOLI, SAM JR	12 NAME	
03	6587 66 AVE NORTH	13 STREET ADDRESS	
04	PINELLAS PARK FL 34665	14 CITY-ST-ZIP	
05	PD	21 TITLE	☐ Change ☐ Addition
06	GIBSON, PHILLIP	22 NAME	
07	4200 32 AVE., N.	23 STREET ADDRESS	
08	ST PETERSBURG FL 33713	24 CITY-ST-ZIP	
09	ST	31 TITLE	☐ Change ☐ Addition
10	GIBSON, MARY	32 NAME	
11	4200 32 AVE., N.	33 STREET ADDRESS	
12	ST PETERSBURG FL 33713	34 CITY-ST-ZIP	
13		41 TITLE	☐ Change ☐ Addition
14		42 NAME	
15		43 STREET ADDRESS	
16		44 CITY-ST-ZIP	
17		51 TITLE	☐ Change ☐ Addition
18		52 NAME	
19		53 STREET ADDRESS	
20		54 CITY-ST-ZIP	
21		61 TITLE	☐ Change ☐ Addition
22		62 NAME	
23		63 STREET ADDRESS	
24		64 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this report is willfully furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 with an address.

SIGNATURE: X Phillip Gibson Phillip Gibson , President 813-521-4870
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR Telephone Number

0304436 CP