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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 02 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000059540 (3) DOCUMENT

IRONWORKS & STONE IMPORTS, ETC., INC.

Principal Place of Business		Mailing Address			L deniste, the north state about and a new altain that	L 1501165, tis inche stitt datti datti datti datti datti ditta inchi atti datti datt		
227 GULF SHORE BLVD. SOUTH NAPLES FL 33940		6221 S. CLAIBORNE 306		DO NOT WRITE IN THIS SPACE	or.			
		NEW ORLEANS LA 70125 US			3. Date Incorporated or Qualified			
		00			08/25/1993			
2. Principal Place of Business 2a, Mailing Address					4. FEI Number	Applied For		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			65-0438187	Not Applicable \$8.75 Additional		
					5. Certificate of Status Desired			
2		27				Fee Required		
City & State ∏		City & State				\$5.00 May Be		
Zip	Country	28	Counti	V		Added to Fees		
7	25	29	30	,	8. This corporation owes or has paid the current Personal Property Tax due June 30.	_ ~		
1	g. Name and Address of Curre	1	1301		10. Name and Address of New Registered Age			
C T CORPORATION SYSTEM				Name				
1200 SOUTH PINE ISLAND RD.			-	ļ.,				
PLANTATION FL 33324			8	! Street	Address (P.O. Box Number is Not Acceptable)			
			8:	 				
			L			T		
			84	City	FL ⁶	Zip Code		
SIGNATURE	Signature, typed or printed name of registered ag	ent and the if applicable (NO ID DIRECTORS	TE Registered A	jent şignatul	re required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIF	PECTORS IN 12		
IZ. TILE	OFFICERS AN	DELETE	13.			Change		
IAME	WILLKOMM, MARY S	_	1.2 NAME					
TREET ADDRESS	AND ALLIE ALLANDE BLUE A		1.3 STREE	T ADDRESS				
CITY-ST-ZIP	NAPLES FL 33940		1.4 CiTY-	ST - ZIP				
ITLE	D	DELETE	2.1 TITLE	·		Change 🔲 Addi		
IAME	WILLKOMM, WM J III		2.2 NAME					
TREET ADDRESS			2.3 STREE	t address				
ITY-ST-ZIP	NAPLES FL 33940		2. 4 CITY	ST-ZIP				
TLE		DELETE	3.1 TITLE			Change 📙 Addi		
AME			3.2 NAME					
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ITY-ST-ZIP			4.4 CITY-					
TLE			5.1 TITLE			Change Addi		
AME			5.2 NAME					
TREET ADDRESS			5.3 STREE	T ADORESS				
ITY-ST-ZIP			5.4 CITY-	ST-ZIP				
ITLE		DELETE	6.1 TITLE			Change Addi		
IAME			6.2 NAME					
SZERONA TERRITO	1		6.3 STREE	T ADDRESS				

14. I 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.