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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 POCUMENT # P93000081469 (7)

ROLLING STONES LAND DEVELOPMENT, INC. Mailing Address Principal Place of Business 10125 W SUNRISE BLVD #308 10125 W SUNRISE BLVD #306 PLANTATION FL 33322 PLANTATION FL 33322-5670 3. Date Incorporated or Qualified 3a. Date of Last Report 06/25/1996 11/29/1993 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0450834 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Country This corporation has liability for in langible tax under s. 199.032, □ No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent YOUNG, MARLON S Name 10125 W SUNRISE BLVD #306 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33322 83 City Zip Code 85 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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and tic∉ if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS (96/6) 12 13. DELETE 1.1 TITLE Change Addition Ti?ue YOUNG, MARLON S 1.2 NAME NAME 10125 W SUNRISE BLVD #306 1.3 STREET ADDRESS STREET ADDRESS PLANTATION FL 33322 CITY-ST-ZiP 1.4 CITY - ST-ZIP DELETE Change Addition 2.1 TITLE THEF 22 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP C(1Y - \$1 - 2)F DELETE Change Addition 104 31 TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CHY - 5" - 7(P DELETE Addition Change TRILE 4.1 TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIF DELETE 5.1 TITLE Change Addition THLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY - ST - ZIP DELETE Addition Change 6.1 TITLE THE NAME 62 NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP

ng does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that or trustee emptwered to execute this report as required by Chapter 607, Florida Statutes; and that my name timent with an address.

SIGNATURE:

14. I do hereby certify that the information supplied with this Hing does r information indicated on this annual report or supplemental annual re I am an officer or director of the corporation or the occition or trustee

City - St - 7lf

achment with a

Dautine Phone # 0281600

FILED

May 13 1997 8:00am

Secretary of State