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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000024181 (7)

1. Corporation Name

AGELESS STONES, INC.



Principal Place of Business

301 ISLA DORADA BLVD
CORAL GABLES FL 33143

Mailing Address

301 ISLA DORADA BLVD
CORAL GABLES FL 33143

2. Principal Place of Business

2a. Mailing Address

21 10470 N.W. 31st Terr

26 10470 N.W. 31st Terr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 MIAMI, FL

28 MIAMI, FL

24 Zip

Country

Zip

Country

25 33172

25 USA

29 33172

30 USA

9. Name and Address of Current Registered Agent

TREVINO, JUAN A
301 ISLA DORADA BLVD
CORAL GABLES FL 33143

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 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

Signature, typed or printed name of registered agent and title as officer

(If Other Registered Agent, Signature and Title as Officer)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	DIXIT, DEVASH	
STREET ADDRESS	701 EMERALD HOUSE, DEVI ROA	
CITY-STATE-ZIP	SECUNDERABAD, INDIA	
TITLE	D	☒ DELETE
NAME	RAMIREZ, ROSA MARIA	
STREET ADDRESS	301 ISLA DORADA BLVD	
CITY-STATE-ZIP	CORAL GABLES FL 33143	
TITLE	D	☒ DELETE
NAME	RAMAKRISHNA, CHITRA	
STREET ADDRESS	4640 NW 93RD DORAL CT	
CITY-STATE-ZIP	MIAMI FL 33178	
TITLE	PT	☐ DELETE
NAME	TREVINO, JUAN A	
STREET ADDRESS	301 ISLA DORADA BLVD	
CITY-STATE-ZIP	CORAL GABLES FL 33143	
TITLE	S	☐ DELETE
NAME	RAMAKRISNA, A V	
STREET ADDRESS	4640 NW 93RD DORAL CT	
CITY-STATE-ZIP	MIAMI FL 33178	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	DIRECTOR	☐ Change ☒ Addition
2. NAME	YOGESH DIXIT	
3. STREET ADDRESS	Jakarta Indonesia	
4. CITY-STATE-ZIP		☐ Change ☐ Addition
5. TITLE		☐ Change ☐ Addition
6. NAME		
7. STREET ADDRESS		
8. CITY-STATE-ZIP		☐ Change ☐ Addition
9. TITLE		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY-STATE-ZIP		☐ Change ☐ Addition
13. TITLE		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY-STATE-ZIP		☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and that I do 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 25/96 (305) 477-1454

CR2E034 (12/95)