

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000050146 (7)

1. Corporation Name

ARTISTIC PRECAST CORAL & STONE, INC.

Principal Place of Business

517 NW 1 AVE.
FT. LAUDERDALE FL 33301

Mailing Address

1300 N. FED HWY 101
BOCA RATON FL 22432



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

MILLER, COREY P
1300 N. FEDERAL HWY., #101
BOCA RATON FL 33432

3. Date Incorporated or Qualified

07/06/1994

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0523503

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 193.032,
Florida Statutes

☒ Yes ☐ No

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 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 the corporation

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
MILLER, LAUREN P
17856 BONIELLO DR.
BOCA RATON FL 33496

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PRES.
MILLER, COREY P
17856 BONIELLO DR.
BOCA RATON, FL 33496

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ DELETE

TITLE
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1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY - ST - ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY - ST - ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY - ST - ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY - ST - ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY - ST - ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/96

4073950129

CR2E034 (12/95)