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PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 P94000066895 (1) **DOCUMENT #** THE HEARTHSTONE CONSTRUCTION CORP. Mailing Address Principal Place of Business 12721 SW 99TH AVENUE 12721 SW 99TH AVENUE MIAMI FL 33176 MIAM! FL 33176 3a. Date of Last Report 3. Date Incorporated or Qualified 04/18/1995 09/06/1994 Applied For 4. EEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 65-0520221 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s. 199.032, Country Zip Zin Yes No Florida Statutes 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) DE CUN. GUILLERMO 82 12721 SW 99TH AVENUE 83 **MIAMI FL 33176** Zip Code 85 84 City 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. Thereby accept the appointment as registered agent, I am familiar with, and accept the obligations of. Section 607.0505, Florida Statutes. SIGNATURE DATE NOTE Bookstood Agent signal no respired when recisiting Signature, typos or period name of mg inercit agent and still account in ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition DELETE 1. 1 DILE **PVPS** TITLE 1.2 NAME **GUILLERMO, DECUN** NAME 1.3 STREET ADDRESS 12721 SW 99TH AVENUE STREET ADDRESS 14 CHY-ST-ZIP MIAMI FL CITY-ST-ZIP Change Addition DELETE 2 1 TITLE TITLE 2.2 NAME DELVALLE, ISABEL T NAME 2.3 STREET ADDRESS 12721 SW 99TH AVENUE STREET ADDRESS 2 4 CHY - ST - ZIP MIAMI FL CITY-ST-ZIP Change ■ Addition DELETE 3 1 TITLE TULE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4 CITY - ST - ZIP CITY-ST-7P Change Change ☐ Addition DELETE 4 1 TITLE TITLE 4.2 NAME NAME 4 3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - 2IP CITY-ST-ZIP Change ☐ Addition DELETE 5 1 THRE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City St-ZiF CITY-ST-ZIP Change Addition DELETE & 1 TITLE THILE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY - ST - ZIP 14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does 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 suppliciental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that I am an officer or director of the cord practic or 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.

CR2E034 (12/95)