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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000077504 (6) DOCUMENT

ART DECO STONE, INC.

FILED Jan 22 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 2950 N.W. 33RD AVENUE 2950 N.W. 33RD AVENUE MIAMI FL 33142 MIAMI FL 33142 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/21/1994 2a. Mailing Address 4. FEI Number 2. Principal Place of Business 65-0530555 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing **\$5.00** May Be ___ Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible Yes ☐ No 30 Personal Property Tax due June 30. 25 29 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name INDA, JAVIER 611 S.E. 4TH PLACE Street Address (P.O. Box Number is Not Acceptable) 82 HIALEAH FL 33010 83 City 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 abent for both 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 fulf, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE Change Addition 1.1 TITLE TITLE INDA, JAVIER NAME 1.2 NAME 611 S.E. 4TH PLACE 1.3 STREET ADDRESS STREET ADDRESS HIALEAH FL 33010 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition ___ DELETE Change 2.1 TITLE TITLE TORADO, ROGELIO 2.2 NAME NAME 755 SE 9TH PLACE STREET ADDRESS 2.3 STREET ADDRESS HIALEAH FL. CITY-ST-ZIP 2. 4 CITY - ST - ZIP Addition □ DELETE Change 3.1 TITLE TITLE ACOSTA JORGE 3.2 NAME NAME 400 W. PARK DR. #101 3.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE TITLE 6.1 TITLE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADORESS 6.4 CITY - ST-ZIP CITY-ST-ZIP

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 of 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 of 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, in an attachment with an address.

Æ REQUIRED

SIGNATURE:

305633736