

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000079701 (6)

1. Corporation Name

GRACE STONE, CORP.

Principal Place of Business

2594 ALI BABA AVE.
OPA LOCKA FL 33054

Mailing Address

2594 ALI BABA AVE. P.O. Box 541455
OPA LOCKA FL 33054-3138

FILED
Jun 19 1997 8:00am
Secretary of State



2. Principal Place of Business

21 2594 ALI-BABA AVE. P.O. BOX 541455

Suite, Apt. #, etc.

2a. Mailing Address

27 Suite, Apt. #, etc.

City & State

23 OPA-LOCKA FL.

Zip

Country

24 33054 25 DADE

City & State

28 OPA-LOCKA FL.

Zip

Country

29 33054 30 DADE

9. Name and Address of Current Registered Agent

WHITAKER, DONNA
2594 ALI BABA AVENUE
OPA LOCKA FL 33054

3. Date Incorporated or Qualified

10/31/1994

3a. Date of Last Report

06/21/1996

4. FEI Number

65-0531650

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name THOMAS TAPANINEN

82 Street Address (P.O. Box Number is Not Acceptable)

83 765 NW 126th Street

84 City NORTH MIAMI

FL

85 Zip Code 33168

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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

Thomas Tapaninen

April 29, 1997

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME PSTD
STREET ADDRESS WHITAKER, DONNA
CITY-ST-ZIP 2594 ALI BABA AVE.
OPA LOCKA FL 33054

TITLE ☒ DELETE

NAME VP
STREET ADDRESS WHITAKER, JAMES
CITY-ST-ZIP 2594 ALI BABA AVE
OPA LOCKA FL

TITLE ☐ DELETE

NAME VP
STREET ADDRESS TAPANINEN, TOM
CITY-ST-ZIP 765 NW 126TH STREET
NORTH MIAMI FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

PSTD
TAPANINEN, TOM
765 N.W. 126th ST
NORTH MIAMI, FLA. 33168
VP
VAN VALKENBURG, LEON
7925 SHALIMAR ST.
MIAMI FLA. 33023

14. I do 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 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 *Thomas Tapaninen*

4-29-97 687-9666

CR2E034 (9/96)