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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400088369 (1)

STONE RESOURCE SYSTEMS, INC.

Mailing Address

Principal Place of Business 408 6TH AVENUE NORTH 408 6TH AVENUE NORTH TIERRA VERDE FL 33715 TIERRA VERDE FL 33715 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/06/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-3291502 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 22 27 City & State City & State Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent Name and Address of New Registered Agent **B1** Name STONE, JEFFREY B 408 6TH AVE NO. Street Address (P.O. Box Number is Not Acceptable) TIERRA VERDE FL 33715 83 64 City Zip Code 85 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, typed or printed name of registered agent and title it applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition TITLE 1.1 TITLE Change STONE, JEFFREY B 1.2 NAME NAME **408 6TH AVENUE NORTH** 1.3 STREET ADDRESS STREET ADDRESS TIERRA VERDE FL 33715 CITY-ST-ZIP 14 CITY-ST-ZIP DELETE Addition Change TITLE 21 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP Addition DELETE Change TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Change ■ Addition TITLE 4.1 TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 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 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 organ attachment with an address. Lippedy B. Stone

SIGNATURE:

BISGE DENT

FILED

Apr 09 1998 8:00am

Secretary of State

867-4002