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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9500009019

1. Corporation Name

INTERNATIONAL STONE DEPOT, INC.

Principal Place of Business 7350 N.W. 7TH 3T. 7400 JW 7 S7 SUITE 105 SUITE 105 MIAMI FL 33126 MIAMI FL 33126			257 109		DO NOT WR	DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed 02/02/1995				
Principal Place of Business 2a. Mailing Address					4. FEI Number 65-0553938			Applicable	
21 26					037033330				
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certifcate of Status Desired	×	\$8.75 A	I	
City & State City & State					6. Election Campaign Financing		\$5.00 May Be		
23 28					Trust Fund Contribution		Added to	, ,	
Zip	Country	Country Zip Cou			y 8. This corporation owes the current year Intangible Personal Property Tax. □ Yes □ No				
F-1				10. Name and Address of New Registered Agent					
Name and Address of Current Registered Agent				81 Name					
CASTILLO, ALVARO				•					
1533 SUNSET DRIVE SUITE 201 MIAMI FL 33143			82	Street Address (P.O. Box Number is Not Acceptable)					
			83	-					
			84	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			t signature r	required when reinstating)	DATE			
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO O	-FICERS A			
TITLE	_		1.1 TITLE				Change	☐ Addition	
NAME	MONTALVO, RICARDO								
STREET ADDRESS	7350 N.W. 7TH ST. SUITE 105			ADDRESS					
CITY-ST-ZIP	110 110:1 0 0 0 1 1 2		1.4 CITY-ST	r-ZIP					
TITLE	VD □ DELETE 2.1		2.1 TITLE				Change	☐ Addition	
NAME	ROSADO, CARLOS 2.		2.2 NAME						
STREET ADDRESS	7000 1111 1111 01 100		2.3 STREET	ADDRESS	7400 NW 7W St. 10	400 NW 70 St. 109			
CITY-ST-ZIP			2.4 CITY-S	T- ZIP	MIBHI FL	<u> </u>			
TITLE			3.1 TITLE				Change	☐ Addition	
NAME	3.2		3.2 NAME						
STREET ADDRESS	3.3.5		3.3 STREET	ADDRESS				1	
CITY-ST-ZIP			3.4. CITY-S	T-ZIP				□ Addition	
TITLE		☐ DELETE	4.1 TITLE				Change	Addition	
NAME			4, 2 NAME						
STREET ADDRESS			4.3 STREET	ADDRESS					
CITY-ST-ZIP			4.4 CITY-ST	Γ-ZI P					

CITY-ST-ZIP 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 suppliemental 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, with all other like empowered.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: SIGNATURE and TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ DELETE

☐ DELETE

04.30.99 (305)267-2120

Change

Change

Addition

Addition