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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS Secretary of State 02-22-1999 90145 002 \*\*\*150.00

FILED Feb 22, 1999 8:00 am

1999

## DOCUMENT # P9600000842

1. Corporation Name

SHINING STONES, INC.

Principal	Place	of	Business

Mailing Address



23361 TORRE CIRCLE 23361 TORRE CIRCLE **BOCA RATON FL 33433 BOCA RATON FL 33433** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/04/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 740211.W.6KT 115 race 26 7402 NW 6/st 65-0631742 Not Applicable Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Parklan Added to Fees Trust Fund Contribution 8. This corporation owes the current year Intangible **I**¥Yes Personal Property Tax. 29 10. Name and Address of New Registered Agent-Name and Address of Current Registered Agent 81 Name Than FINKELSTEIN, NATHAN 82 Street Addr 23361 TORRE CIRCLE **BOCA RATON FL 33433** 83 84 City arklund orida Statutes, the above-named corporation submits this statement for the purpose of changing its register large was authorized by the corporation's board of directors. I hereby accept the appointment as registered Pursuant to the provisions of Sections 607.0502 and 607.5508, office or registered agent, or both, in the State of Florida. Such agent. I am familiar with and accept the obligations of Sections rida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) of registered agent and title i CR2E034 (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1.1 TITLE TITLE 7402 NW61st Terrack Pur Kland, FL 33067 FINKELSTEIN, NATHAN 1.2 NAME NAME 23361 TORRE CIRCLE 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE TITLE 2.1 TITLE 7402 NW 6/ST Terroce Parkland FL 33067 FINKELSTEIN, MARILYN 2.2 NAME NAME 23361 TORRE CIRCLE 2.3 STREET ADDRESS STREET AODRESS **BOCA RATON FL** 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change 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 54 CITY-ST-ZIP CITY-ST-ZIP Addition 6.1 TITLE ☐ Change □ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 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 or supplemental annual report is true and acturate 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 producer of trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Plack 13 or Plack 13 if shapped to a particular statute of the corporation of the producer of Block 12 or Block 13 if changed all other like empowered.

SIGNATURE: