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

P96000016250 (8) DOCUMENT

STONE HOUSE, INC.

FILED Mar 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						BIOL MOTO OTHER DIRECT BEFOR BOTH FORD
3315 NW 81 TERRACE 3315 NW 81 TERRACE						
MIAMI FL 33147 MIAMI FL 331					DO NOT WRITE IN	THIS SPACE
					3. Date Incorporated or Qualified	THIS SI ACL
					02/19/1996	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0643006	Not Applicable
Suite, Apt. #, etc Suite, Apt		Suite, Apt. #, etc.	Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & Stat	le	City & State			6. Etection Campaign Financing	\$5.00 May Be
23		28	1 0		Trust Fund Contribution	
Zip	Country	Zip	Country		8. This corporation owes or has paid to	
24	25 9. Name and Address of Curre	nt Registered Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Regis	
<u> </u>				81 Name	10. 110110 0110 110010	
3315 NW 81 TERRACE						
MAMI FL 33147				82 Street Ad	Idress (P.O. Box Number is Not Acceptable)	
	74111 1 2 00 1 1 1			83	7111	
			i			
				84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607,1508, Florida Statu	tes, the a	ove-named co	progration submits this statement for the purp	, ,
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.						
	and described the oblig	janona or, adotrori gor adod, i i	ionoa ota			1
SIGNATURE	Signature, typed or printed name of registered ag	pent and title if Applicable (NO	TE: Registere	Agent signature rec	quired when reinstaling)	DATE
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	
TITLE	D	DELETE	1.1 TI	'LE		Change Addition
NAME	ANDERSON, ALVIN		12 N	ME		
STREET ADORESS	3315 NW 81 TERRACE		1.3 ST	REET ADDRESS]
CITY-ST-ZIP	MIAMI FL 33147	DELETE		Y-ST-ZIP		Observe Addition
TITLE	ANDERSON, MAE B	☐ DECE IE	2.1 1			☐ Change ☐ Addition
NAME	3315 NW 81 TERRACE		2.2 N/	1		<u> </u>
STREET ADDRESS	MIAMI FL 33147			REET ADDRESS		
CITY-ST-ZIP	Mirani (L 3314)	DELETE	2. 4 C	TY-ST-ZIP		Change Addition
TITLE NAME		FT betrat	3.1 11 3.2 N/			E Ondrige L Novitori
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				TY-ST-ZIP		
TITLE		DELETE	4.1 TI			Change Addition
NAME			4.2 N			
STREET ADDRESS			4	REET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		DELETE	5.1 TI			☐ Change ☐ Addition
NAME	1	_	5.2 N	l l		–
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				TY-ST-ZIP		
TITLE		DELETE	6.1 TI			☐ Change ☐ Addition
NAME			6.2 N	ME		
STREET ADDRESS				REET ADDRESS		j
CITY-ST-ZIP				Y-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 eath; that I am an officer or director of the corporation or the receiver of 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 addichinght with an address.

3-1698