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Mailing Address

10571 N.W. 21ST COURT

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000074048 (5)

UNIVERSAL STONE, INC.

Principal Place of Business

10571 N.W. 21ST COURT

SUNRISE FL 33322 SUNRISE FL 33322-3508 3. Date Incorporated or Qualified 3a. Date of Last Report 09/06/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 26 Suite, Apt. #, etc. Suite. Apt. #, etc \$8.75 Additional Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Z_{10} Country Zip Country Yes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name INCORPORATORS PLUS, INC. 1214 N. UNIVERSITY DRIVE 82 Street Address **PLANTATION FL 33322** NW 83 64 City Zip Code Sunrise 333> 11. Fursuant to the provisions of Sections 607.9502 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 fact out with and accept the oblightings of, Section 607.0505, Florida Statutes. Presd. SIGNATURI min of registered agent and title it acquire OFFICE RS AND DIRECTORS (NOTE: Registered Agent signature required when reinstating) (96/6)12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change ___ Addition DELETE THUE 1.1 TITUE RODRIGUEZ, GILBERT NAME 1.2 NAME R2E034 10571 N.W. 21ST COURT 1.3 STREET ADDRESS STREET ADDRESS SUNRISE FL 33322 €-TY - S1 - 7(F 1.4 CHY-ST-ZIP DELETE Change Addition 11716 2.1 TITLE NAME 2.2 NAME STREET ADORESS 2.3 STREET ADDRESS CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition T.TLF 31 TITLE 3.2 NAME 3.3 STREET ADORESS STREET ADDRESS CITY - ST - Z6 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE THE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP City-ST-ZP DELETE ☐ Change ☐ Addition 5.1 TITLE TITLE NAME 5.2 NAME **53 STREET ADDRESS** STREET ADDRESS

5.4 CiTY-ST-ZiP

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

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

6.1 TITLE 6.2 NAME

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

SIGNATURE

appears in Block 12 or Block

CITY SE-76

100

NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNINGS FFICER OR PRECTOR

DELETE

1-1497 (9

FILED

Apr 04 1997 8:00am

Secretary of State

(954) 746-3843

Change

Addition