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Apr 21 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000013036 (3)

1. Corporation Name

CORALINA STONE, INC.



Principal Place of Business

Mailing Address

~~9686 FONTAINEBLEU BOULEVARD, UNIT 303~~
~~MIAMI FL 33172~~

~~9686 FONTAINEBLEU BOULEVARD, UNIT 303~~
~~MIAMI FL 33172~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 8485 NW 54 ST

Suite, Apt. #, etc.

22 City & State

23 MIAMI FL

24 33166

Country

25 U.S.

2a. Mailing Address

26 SAME

Suite, Apt. #, etc.

27 SAME

28 City & State

29 SAME

Country

30 SAME

3. Date Incorporated or Qualified

02/10/1997

4. FEI Number

65-0729231

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

~~AMERILAWYER CHARTERED~~
~~340 ALMERIA AVENUE~~
~~CORAL GABLES FL 33104~~

10. Name and Address of New Registered Agent

81 Name Jocelyn Gonzalez-Feliu
82 Street Address (P.O. Box Number is Not Acceptable) 9686 Fontainebleu Blvd Unit 303
83
84 City MIAMI FL 85 Zip Code 33172

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]*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/1/98

12. OFFICERS AND DIRECTORS

TITLE JPD
NAME GAGG, IVELISSE A
STREET ADDRESS ~~9686 FONTAINEBLEU BOULEVARD, UNIT 303~~
CITY-ST-ZIP ~~MIAMI FL 33172~~

TITLE S
NAME GONZALEZ, JOCELYN
STREET ADDRESS 9686 FONTAINEBLEU BOULEVARD, UNIT 303
CITY-ST-ZIP MIAMI FL 33172

TITLE T
NAME VASQUEZ, MAGALI
STREET ADDRESS 9686 FONTAINEBLEU BOULEVARD, UNIT 303
CITY-ST-ZIP MIAMI FL 33172

TITLE D
NAME GAGG, PAUL
STREET ADDRESS ~~9686 FONTAINEBLEU BOULEVARD, UNIT 303~~
CITY-ST-ZIP ~~MIAMI FL 33172~~

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 10990 NW 59 ST
1.4 CITY-ST-ZIP MIAMI FL 33178

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS 10990 NW 59 ST
4.4 CITY-ST-ZIP MIAMI FL 33178

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 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 on an attachment with an address.

SIGNATURE *[Signature]*

4/1/98 (301)431-9944

CR2E034 (10/97)