SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000094769 (1)

DEAN CUSTOM STONE AND MASONRY, INC.

Principal Place of Business 4901 SW 95TH COURT MIAMI FL 33165		Mailing Address 4901 SW 95TH COURT MIAMI FL 33165				
					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
O Dringing!	Diana of Duriness	2a, Mailing Address			11/05/1997 4. FEI Number Applied	
2. Principal Place of Business		F`-1				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		 	\$8.75 Addit	plicable
22		27			5. Certificate of Status Desired Fee Reguln	
City & State			City & State		6. Election Campaign Financing \$5.00 May	
23		28			Trust Fund Contribution Added to Fe	
Zip	Country	Zip	Сош	ntry	8. This corporation owes or has paid the current year Intensit	
24	25	29	30		Personal Property Tax due June 30. Yes X No	
<u> </u>	9. Name and Address of Curi				10. Name and Address of New Registered Agent	
AM	ERILAWYER			81 Name		
343 ALMERIA AVENUE			}	82 Street Add	fress (P.O. Box Number is Not Acceptable)	
CORAL GABLES FL 33134				0110017100	areas (1.10. Box Humbol 15 Not Accorption)	
				83		
			ŀ	84 City	85 Zip Code	
				City	FL I's	,
11. Pursua	nt to the provisions of sections 607.0	502 and 607.1508, Florida S	tatutes, the abo	ove-named corpo	oration submits this statement for the purpose of changing its registe	red
office o	or regis tere d agent, or both, in the Sta I am fa mil iar with, and accept the ob	ate of Florida. Such change ligations of, section 607.050	was authorized)5. Florida Stati	by the corporatutes.	tion's board of directors. I hereby accept the appointment as registe	red
SIGNATURE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
- CIGITATORA	Signature, typed or printed name of registered a			ed Agent signature rec	quired when reinstating) DATE	
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12
TITLE	PVST	DELET		-	Change	Addition
NAME	DEAN, THOMAS A JR		1.2 NA	ME		
STREET ADORESS			1.3 STF	REET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33165			Y-ST-ZIP		
TITLE	DEAN THOMAS A ID	L DELET			Change	Addition
NAME	DEAN, THOMAS A JR s 4901 SW 95TH COURT		2.2 NA	•		
STREET ADDRESS	-			REET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33165	<u> </u>		Y-ST-ZIP		
TITLE		DELE1			L_ Change L_	Addition
NAME			3.2 NA			
STREET ADDRESS	S			EET ADDRESS		
CITY-ST-ZIP	ļ 			Y-ST-ZIP		
TITLE		DELET		i	L_ Change L_	Addition
NAME			4.2 NA			
STREET ADDRESS	S			EET ADDRESS		
CITY-ST-ZIP TITLE				Y-ST-ZIP	[7] F7	
		[] DELET	-	1	Change	Addition
NAME			5.2 NAI	ı		
STREET ADDRESS	S i			EET ADDRESS		
CITY-ST-ZIP	l .		5.4 CIT	Y-ST-ZIP		

DELETE

6.1 TITLE

6,2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

THOMAS A, DEAN TR

FILED Oct 01 1998 8:00am Secretary of State

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 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 It charged, or an an attackment with an address.

Change Addition