

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 19, 2001 8:00 am
Secretary of State


06-19-2001 90006 004 ***150.00

DOCUMENT # P98000091104
 1. Entity Name
TWIN STONE DESIGNS AND INSTALLATION, INC.

Principal Place of Business 7915 NW 170 TERR. MIAMI FL 33015	Mailing Address 7915 NW 170 TERR. MIAMI FL 33015
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2. Principal Place of Business 470 Arsin Blvd.	3. Mailing Address
Suite, Apt. #, etc. A	Suite, Apt. #, etc.

City & State Hialeah, FL	City & State
Zip 33009	Country USA



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PARENTE, MAYRA L
7915 NW 170 TERR.
MIAMI FL 33015

4. FEI Number **65-0956127**

Applied For	Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

7. Name and Address of New Registered Agent

Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARENTE, MAYRA 7915 NW 170 TERR. MIAMI FL 33015	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MEDINA, PUNIO I 7915 NW 170 TERR. MIAMI FL 33015	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MAYRA PARENTE 4/27/01 (954) 458-1009

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)



Attachment
A00377

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

May 30, 2001

TWIN STONE DESIGNS AND INSTALLATION, INC.
7915 NW 170 TERR.
MIAMI, FL 33015

Subject: TWIN STONE DESIGNS AND INSTALLATION, INC.

Reference
Number:

P98000091104

Please be advised, we have received your annual report/uniform business report; however, the report has not been filed and a copy is being returned for the following correction(s):

Please sign and return your check submitted with the annual report/uniform business report.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/jg.
ANNUAL REPORTS SECTION

Re-mailed CR # 3713
on 6-10-01
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Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314