

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000021457

FILED  
Feb 25, 2009  
Secretary of State

Entity Name: NATURAL STONE CREATIONS, INC.

## Current Principal Place of Business:

760 WEST 84TH ST  
HIALEAH, FL 33014

## New Principal Place of Business:

760 WEST 84TH ST  
HIALEAH, FL 33014

## Current Mailing Address:

750 WEST 39TH PLACE  
HIALEAH, FL 33014

## New Mailing Address:

760 WEST 84TH ST  
HIALEAH, FL 33014

FEI Number: 65-0962624

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CAULA, ANAYANCY M  
750 WEST 39TH PLACE  
HIALEAH, FL 33012 US

## Name and Address of New Registered Agent:

CAULA, ANAYANCY M  
760 WEST 84TH ST  
HIALEAH, FL 33014 US

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:

02/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: LEIVA, ISABEL C DIR.  
Address: 750 WEST 39TH PLACE  
City-St-Zip: HIALEAH, FL 33012

Title: VP ( ) Delete  
Name: CAULA, ANAYANCY M DIR  
Address: 750 WEST 39TH PLACE  
City-St-Zip: HIALEAH, FL 33012 US

Title: TREA ( ) Delete  
Name: CAULA, ANTONIO V DIR  
Address: 750 WEST 39TH PLACE  
City-St-Zip: HIALEAH, FL 33012 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: CAULA, ANYANCY DIR  
Address: 760 WEST 84TH ST  
City-St-Zip: HIALEAH, FL 33014

Title: VP (X) Change ( ) Addition  
Name: CAULA, ANTONIO DIR  
Address: 760 WEST 84TH ST  
City-St-Zip: HIALEAH, FL 33012 US

Title: TREA (X) Change ( ) Addition  
Name: CAULA, ANTONIO V DIR  
Address: 760 WEST 84 THST  
City-St-Zip: HIALEAH, FL 33014 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANAYANCY CAULA

PRES

02/25/2009

Electronic Signature of Signing Officer or Director

Date