FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
02 APR 22 PM 3:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000037579

1. Entity Name
INTERNATIONAL STONE CONCEPTS, INC.

600005325776--6
-04/23/02--01002--004
****193.75 ****150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4225 NW 65 Avenue	4225 NW 65 Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Coral Springs, FL	City & State: Coral Springs, FL
Zip: 33067 Country: USA	Zip: 33067 Country: USA

4. FEI Number: 65-0912561 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Daria K. Luzniak

Street Address (P.O. Box Number is Not Acceptable): 4225 NW 65 Avenue

City: Coral Springs FL Zip Code: 33067

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: Daria K. Luzniak , Daria K. Luzniak 4/16/02
Signature, typed or printed name of registered agent and title if applicable. (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) ☐

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
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

TITLE	P/D
NAME	Schmollinger, Carl S.
STREET ADDRESS	966 Wesley Avenue
CITY-ST-ZIP	Huntingdon Valley, PA 19006
TITLE	D
NAME	Smolin, Seymour
STREET ADDRESS	8363 Spring Lake Drive
CITY-ST-ZIP	Boca Raton, FL 33496
TITLE	V/D
NAME	Luzniak, Lubomir
STREET ADDRESS	4225 NW 65 Avenue
CITY-ST-ZIP	Coral Springs, FL 33067
TITLE	S/T/D
NAME	Luzniak, Daria K.
STREET ADDRESS	4225 NW 65 Avenue
CITY-ST-ZIP	Coral Springs, FL 33067
TITLE	
NAME	
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CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Daria K. Luzniak Daria K. Luzniak 4/16/02 (305) 373-1000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)