## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## **FILED** DOCUMENT # P99000053441 Apr 04, 2000 8:00 am Secretary of State NATURAL STONES OF ORLANDO, INC. 04-04-2000 90105 022 \*\*\*158.75 Principal Place of Business Mailing Address 7811 NW 72ND AVE 7811 NW 72ND AVE MIAMI FL 33166-2215 MIAMI FL 33166 2. Principal Place of Business 3. Mailing Address 2563 DIVERSIFIED WAY 2563 DIVERSIFIED WAY DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 65-0930342 Not Applicable ORLANDO, ORLANDO, FLCountry Country Zip \$8.75 Additional Zip \* 5. Certificate of Status Desired 32804 32804 ORANGE ORANGE 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RUBIO, DAVID S RUBIO, DAVID S Street Address P.O. BOX PLINDER IN THE ACCEPTABLE WAY 7811 NW 72ND AVE **MIAMI FL 33166** Zip Code 32804 FL ORLANDO 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. PD ☐ Addition PD ☐ Change ☐ Delete TITLE TITLE RUBIO, DAVID S RUBIO, DAVID S NAME STREET ADDRESS 2563 DIVERSIFIED WAY 7811 NW 72ND AVE STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32804 CITY-ST-ZIP MIAMI FL 33166 ☐ Change Addition TITLE ☐ Delete TITLE RUBIO, RAUL J NAME RUBIO, RAUL J NAME STREET ADDRESS 7811 NW 72ND AVE STREET ADDRESS 2563 DIVERSIFIED WAY CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33166 ORLANDO, FL 32804 ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Del€te TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 executerhis 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 a address, with n all other like empowered.