

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000004746

**Entity Name:** ALPHA STONE DESIGNS, INC.

**Current Principal Place of Business:**

4723 EXCHANGE AVENUE  
NAPLES, FL 34104

**Current Mailing Address:**

1853 SENEGAL DATE DRIVE  
NAPLES, FL 34119

**FEI Number:** 59-3690694

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

VASILE G. BRISC  
1853 SENEGAL DATE DRIVE  
NAPLES, FL 34119 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name BRISC, VASILE GP  
Address 1853 SENEGAL DATE DRIVE  
City-State-Zip: NAPLES FL 34119

Title S  
Name DORINA, BRISC S  
Address 1853 SENEGAL DATE DRIVE  
City-State-Zip: NAPLES FL 34119

Title VP  
Name ROSMANN, SIGFRIED VP  
Address 1963 WELLESLEY CIR  
City-State-Zip: NAPLES FL 34116

Title VP  
Name PEIA FILIP, CIPRIAN  
Address 4225 20TH AVE NE  
City-State-Zip: NAPLES FL 34104

*I hereby 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 all other like empowered.*

**SIGNATURE:** VASILE BRISC

**PRESIDENT**

**01/20/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date