


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

<b>DOCUMENT # 656084</b> 1. Entity Name UNIVERSAL STONE AND BRICK, INC.	
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**FILED**  
**Jan 29, 2004 08:00 AM**  
**Secretary of State**

Principal Place of Business 3123 DEWEY ST. TAMPA, FL 33607	Mailing Address 3123 DEWEY ST. TAMPA, FL 33607
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**DO NOT WRITE IN THIS SPACE**

01262004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1977550	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

**6. Name and Address of Current Registered Agent**

ESTEVEZ, ELIO 3123 DEWEY ST. TAMPA, FL 33607	<p><b>DO NOT WRITE IN THIS SPACE</b></p>
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

<b>FILE NOW!!! FEE IS \$150.00</b> After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	U00000019830 01/29/04-80040-016 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ESTEVEZ, ELIO 3123 DEWEY ST. TAMPA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ESTEVEZ, ANA 3123 DEWEY ST. TAMPA, FL
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**DO NOT WRITE  
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* 1/28/04 *(819) 872-2647*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #