2006 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 15, 2006 08:00 AM **DOCUMENT # P04000009710 Secretary of State** MICHAEL EBELING MASONRY INC. Principal Place of Business Mailing Address 19 N.E. 17TH AVENUE 19 N.E. 17TH AVENUE POMPANO BEACH, FL 33060 POMPANO BEACH, FL 33060 01172006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 54-2143765 Not Applicat. \$8,75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent EBELING, MICHAEL DO NOT WRITE **19 N.E. 17TH AVENUE** POMPANO BEACH, FL 33060 IN THIS SPACE 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 ubligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and life it applicable (NOTE: Registe, ed. Agent aigmature required when reinstating) DATE Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS HILE NAME EBELING, MICHAEL U00000434884 19 N.E. 17TH AVENUE SIREEI ADDRESS 02/25/06-80019-024 150.00 CITY-ST-ZIP POMPANO BEACH, FL 33060 tine. EBELING, LINDA NAME STREET ADDRESS 19 N.E. 17TH AVENUE CITY-ST-ZIP POMPANO BEACH, FL 33060 IIILE NAME STREET ADDRESS DO NOT WRITE CITY-SI-AP TITLE IN THIS SPACE NAME STREET ADDRESS CTTY-ST-ZIP MILE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

NAME SIREH ADDRESS CITY-ST-ZIP

Michael & believe

1/17/01

FILED