| Name and Address of Current Registered Agent: | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|-----------------|-----------------------|------------|
| MARTINEZ BRICK WORK INC 8198 TOM COSTINE ROAD LAKELAND, FL 33809 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 | E: MANRIQUE JAVIER MARTINEZ | | | 01/12/2019 |
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Director Detail : | | | | |
| Title | D | Title | D | |
| Name | MARTINEZ, MANRIQUE J | Name | MARTINEZ, ORFA N | |
| Address | 8198 TOM COSTINE ROAD | Address | 8198 TOM COSTINE ROAD | |
| City-State-Zip: | LAKELAND FL 33809 | City-State-Zip: | LAKELAND FL 33809 | |
| Title | VP | | | |
| Name | MARTINEZ, JOSE ALEJANDRO | | | |
| Address | 8198 TOM COSTINE ROAD | | | |
| City-State-Zip: | LAKELAND FL 33809 | | | |

Current Mailing Address:

8198 TOM COSTINE ROAD LAKELAND, FL 33809

DOCUMENT# P00000029651

8198 TOM COSTINE ROAD LAKELAND, FL 33809

FEI Number: 65-0989430

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Entity Name: MARTINEZ BRICK WORK, INC.

Current Principal Place of Business:

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

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: MANRIQUE JAVIER MARTINEZ

PRESIDENT

01/12/2019

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 12, 2019 Secretary of State 4181609796CC

Certificate of Status Desired: Yes