2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 09, 2004 8:00 am Secretary of State 02-09-2004 90047 041 ***150.00

DOCUMENT # 267283

1. Entity Nam FLORIDA	BRICK AND CLAY COMPA	NY, INC.					
Principal Place of Business 1708 TURKEY CREE K ROAD TURKEY CREEK ROAD PLANT CITY, FL 33567 US		Mailing Address 1708 TURKEY CREE K ROAD TURKEY CREEK ROAD PLANT CITY, FL 33567 US			2.12		. ,
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01202004 C	ng-P CR2E0	34 (10/03)	
City & State		City & State		4. FEI Number 59-1007605		<u> </u>	plied For t Applicable
Zip	Country	Zip	Country	5. Certificate of Statu	us Desired	\$8.75 Add Fee Required	litional .
	6. Name and Address of Current I	Registered Agent		7. Name and Addres	ss of New Registered /	Agent	
HERMIDA, REMY			Name				
1708 TURÍ	, KEMT KEY CREEK RD. TY, FL 33566		Street Addre	ss (P.O. Box Number is No	t Acceptable)		
				•			
	•		City		FL	Zip Code	9
8. The above	named entity submits this statement for	the purpose of changing its	registered office or regi	istered agent, or both, in the	e State of Florida. I am	familiar with,	and accept
the obligations of registered agent. SIGNATURE							
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOT	E: Registered Agent signature rec	quired when reinstating)	DATE		
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.0	9. Election Campa Trust Fund Con		\$5.00 May Be Added to Fees		,	
10.	· OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANG	GES TO OFFICERS AND	DIRECTOR	S IN 11
NAME STREET ADDRESS CITY-ST-ZIP	STD AZORIN, ANTONIO C. JR. 6704 PEMBERTON OAKS COUF SEFFNER, FL	. Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DODSON, WILLIAM D. 2110 JUNIPER DRIVE PLANT CITY, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	PD HERMIDA, REMY 1707 WEST REYNOLDS PLANT CITY, FL	Delete	NAME STREET ADDRESS CITY-ST-ZIP		and the state of t	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AZORIN, MARIA 32 BAHAMA CIRCLE TAMPA, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AZORIN, MANUEL 1211 W. REDBUD CIRCLE PLANT CITY, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition
TITLE		☐ Delete 1	τιπίε			Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP-			NAME STREET ADDRESS CITY-ST-ZIP		- <u></u>		·· ,
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 effect in the empowered.							
SIGNATURE: July July July July July July July July							
1	SIGNATURE AND TYPED OR E	PRINTED NAME OF SIGNANO GERCEI	R OH DIRECTOR	D	ate	Daytime Phone #	