

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 29, 2004 08:00 AM
Secretary of State**

DOCUMENT # 287502

1. Entity Name
CRAFTSMAN MASONRY INC



Principal Place of Business
**1106 NW 79 DR.
PLANTATION, FL 33322**

Mailing Address
**1106 NW 79 DR.
PLANTATION, FL 33322**



03222004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1083282

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ABBATE, LORENZO J JR
1106 NW 79 DRIVE
PLANTATION, FL 33372**

**DO NOT WRITE
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 obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and S.C. (Applicable)

NOTE: Registered Agent's status is reported when it is not 199

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
P
NAME
LORENZO, ABBATE J JR.
STREET ADDRESS
1106 NW 79 DR
CITY ST ZIP
PLANTATION, FL 33322

TITLE
VP
NAME
VELASQUEZ, SONIA M
STREET ADDRESS
1106 NW 79 DR
CITY ST ZIP
PLANTATION, FL 33322

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

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CITY ST ZIP

1000000098682
03/29/04-80050-015 158.75

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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)(f), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date of Filing

3/26/04