2001 UNIFORM BUSINESS REPORT (UBR)

May 16, 2001 8:00 am Secretary of State **DOCUMENT # 668408** 1. Entity Name 05-16-2001 90121 001 ***300.00 BAY MASONRY OF TAMPA, INC. Principal Place of Business Mailing Address 1712 LEMON ST. 1712 LEMON ST. 71680 TAMPA FL 33606 TAMPA FL 33606 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1994155 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WEINSTEIN, IRA Street Address (P.O. Box Number is Not Acceptable) 3902 HENDERSON BLVD. STE. 200 **TAMPA FL 33629** City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CD TITLE ☐ Delete BYRD, JULIAN NAME NAME 2501 W TYSON AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **TAMPA FL 33611** CITY-ST-70P TITLE Change ☐ Addition TITLE ☐ Delete KOCHES, DEBORAH L NAME NAME 3819 HORATIO ST # 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33609** PTD Change Addition TITLE ☐ Delete TITLE BYRD, ROBERT H NAME NAME 3114 S JULIA CIR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TAMPA FL CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Defete TITLE KELLEY, JACK RANDALL NAME NAME 3639 WOODHILL DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIE BRANDON FL 33511 CITY-ST-ZIP ☐ Delete ☐ Addition TITLE TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

;R2E034 (10/00)

DEBURAH L. KOCHES

13. 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 11 or Block 12 if

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: - Deurah 2 Kuch