2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# 668408

Entity Name: BAY MASONRY OF TAMPA, INC.

Current Principal Place of Business:

1712 LEMON ST.
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

1712 LEMON ST.
TAMPA, FL 33606

New Mailing Address:

FEI Number: 59-1994155 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEINSTEIN, IRA
3902 HENDERSON BLVD.
STE. 200
TAMPA, FL 33629 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CD ( ) Delete
Name: BYRD, JULIAN,
Address: 2501 W TYSON AVE
City-St-Zip: TAMPA, FL 33611

Title: S ( ) Delete
Name: HOLLOWAY, DEBORAH
Address: 4114 W. SAN JUAN STREET
City-St-Zip: TAMPA, FL 33629

Title: PTD ( ) Delete
Name: BYRD, ROBERT H,
Address: 3008 W. HAWTHORNE RD.
City-St-Zip: TAMPA, FL 33611

Title: V (X) Delete
Name: KELLEY, JACK RANDALL
Address: 3639 WOODHILL DRIVE
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JULIAN H. BYRD CD 04/29/2005

Electronic Signature of Signing Officer or Director — Date