*2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Feb 20, 2004 08:00 AM DOCUMENT # 853835 Secretary of State 1. Entity Name MASONRY ARTS, INC. Principal Place of Business Mailing Address 2105 THIRD AVE N 2105 THIRD AVE N P.O. BOX 1350 BESSEMER AL 35021-8350 P.O. BOX 1350 BESSEMER AL 35021-8350 2. Principal Place of Business 3. Mailing Address. Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 63-0779005 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 Zip Code FL 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. (am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PTD TITLE ☐ Delete TITIF Change ☐ Addition SWINDAL, ROY V. NAME NAME U00000059245 STREET ADDRESS 103 MOUNTAIN BROOK PARK DRIVE STREET ADDRESS 02/20/04-80074-003 150.00 BIRMINGHAM AL 35213 CITY-ST-ZIP CITY - ST - ZIP DS FITLE ☐ Delete ☐ Chance ☐ Addition WILLIAMS, THERESA N NAME STREET ADDRESS 906 4TH COURT STREET ADDRESS PLEASANT GROVE AL 35127 CITY-ST-ZIP CITY-ST-2IP TIBLE ☐ Delete TITLE ☐ Change ☐ Addition NAME SWINDAL, JOHN E MAME STREET ADDRESS 1340 BRANCHWATER LANE STREET ADDRESS CITY-ST-ZIP BIRMINGHAM AL 35216 CITY - ST- 78P TITLE ☐ Delete TOTAL Change ☐ Addition SWINDAL, VIRGINIA K NAME NAME 1340 BRANCHWATER LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BIRMINGHAM AL 35216 CITY-ST-ZIP TITLE Delete TABLE ☐ Change ☐ Addition HAYS, KENNETH E NAME NAME 1029 COUNTY RD, 198 STREET ADDRESS STREET ADDRESS DANVILLE AL 35619 CITY-ST-ZIP CiTY-S1-ZIP MLE Delete TITLE Change ☐ Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-71P CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 other like empowered. SIGNATURE: N. Williams, Secretary

02/10/04

FILED