2005 FOR PROFIT CGRPORATION ANNUAL REPORT

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

FILED Jan 20, 2005 08:00 AM Secretary of State

Daytime Phone #

ANNUAL REPORT				Secretary of State			
1. Entity Nan	MENT # J36974 MASONRY, INC.				, D	ecretar	y oi Stat
Principal Place of Business Mailing Address 7076 SW ENVIRONMENTAL LAB ARCADIA, FL 34266 US ARCADIA, FL 34266 US			В				
Γ	OO NOT WRITE 8. Name and Address of Current R	01142005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For S9-2737727 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required					
				NOT W THIS SF			
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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	ncing \$5.	00 May Be ed to Fees			оспанительного при виденти в при виденти виден	
TO. TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS	OFFICERS AND D. DP DUNLAP, JOHN 7076 SW ENVIRONMENTAL LAB ARCADIA, FL 34266				000 01/21/	1000186978 105-80081-	} -014 150.00
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE					NOT W		
NAME STREET ADDRESS CITY+ST+ZIP				IN	THIS SF	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET AODRESS CITY-ST-ZIP			•				
indicated of the con	certily that the information supplied with the on this report or supplemental report is troporation or the receiver or trustee empower or an attachment with an address, with	ie and accurate and that my signati ared to execute this report as requir	ure shall have the s	ame lenal ellec	rt as if maria under r	ath that I am an	officer or director