2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000091583

Entity Name: CORNERSTONE ABATEMENT & DEMOLITION CO.

FILED Apr 16, 2003 Secretary of State

| This is a series of the ABATEMENT & BEMOETHON CO. | | | | | |
|--|--|----------------------------------|--|---|--|
| Current Principal Place of Business: | | | New Principal Place of Business: | | |
| 4607 N. 56 TAMPA, F | STH STREET L 33610 | | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| 4607 N. 56 TAMPA, F | STH STREET L 33610 | | | | |
| FEI Number | : 59-3747039 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| PENVOSE, JOHN W PRES. 4607 N. 56TH STREET TAMPA, FL 33610 US | | | MORALES, RAFAEL PRES. 4607 N. 56TH STREET TAMPA, FL 33610 US | | |
| | named entity e of Florida. | submits this statement for the p | ourpose of changing its registere | d office or registered agent, or both, | |
| SIGNATURE: RAFAEL MORALES | | | | 04/16/2003 | |
| | Electror | nic Signature of Registered Age | ent | Date | |
| Election Car | mpaign Financin | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | WILSON, J. ST | OOVER STREET SUITE 400 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D (PENVOSE, JOI 4607 N. 56TH S TAMPA, FL 33 | STREET | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () MORALES, RA 4607 N. 56TH S TAMPA, FL 33 | STREET | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D (MORALES, RO 4607 N. 56TH S TAMPA, FL 33 | STREET | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: | D (|) Delete | Title: | () Change () Addition | |

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.

Name:

Address:

City-St-Zip:

SIGNATURE: RAFAEL MORALES PRES 04/16/2003

MORALES, RICARDO B

4607 N. 56TH STREET

TAMPA, FL 33610

Name:

Address:

City-St-Zip: