

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000085892

FILED
May 01, 2005
Secretary of State

Entity Name: J. GREIFZU PLASTERING, INCORPORATED

Current Principal Place of Business:

404 PAMETO RD.
NOKOMIS, FL 34275

New Principal Place of Business:

Current Mailing Address:

1031 CUMBERLAND RD
VENICE, FL 34293

New Mailing Address:

404 PAMETO RD
NOKOMIS, FL 34275

FEI Number: 11-3650797

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREIFZU, JOEL
1031 CUMBERLAND RD
VENICE, FL 34293 US

Name and Address of New Registered Agent:

GREIFZU, JOEL
607 HAMLIN ST
NOKOMIS, FL 34275 US

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: JOEL T. GREIFZU

05/01/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GREIFZU, JOEL
Address: 216 AVENIDA DE. BAHIA
City-St-Zip: NOKOMIS, FL 34275

Title: SECR (X) Delete
Name: CURTIS, CORY
Address: 1008 PONDEROSA ROAD
City-St-Zip: VENICE, FL 34293 US

Title: T () Delete
Name: MASON, THOMAS LEE
Address: 138 PATTERSON AVE.
City-St-Zip: OSPREY, FL 34229

Title: V (X) Delete
Name: DEGRACE, DOMINIC
Address: 216 AVENIDA DE BAHIA
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GREIFZU, JOEL
Address: 607 HAMLIN ST
City-St-Zip: NOKOMIS, FL 34275

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: JOEL T. GREIFZU

PD

05/01/2005

Electronic Signature of Signing Officer or Director

Date