


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000121734 1. Entity Name TRINITY STONE & FABRICATION, INC.	
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Principal Place of Business 210 NORTH ST. LONGWOOD, FL 32750	Mailing Address 4337 DARDANELLE DR. ORLANDO, FL 32808
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DO NOT WRITE IN THIS SPACE



04212004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1161551	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent JOHNSON, SCOTT E ESQ. 111 N. ORANGE AVE., STE. 1200 ORLANDO, FL 32801	DO NOT WRITE IN THIS SPACE
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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 Donald A. Deluzio Donald A. Deluzio 4/22/04
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 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DELUZIO, DONALD 6229 BLAKEFORD DR. WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D VAN DYKE, DAVID 707 NINOLET AVE. WINTER PARK, FL 32789
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GREER, BARRY 1875 SW 4TH AVE, C-6 DELRAY BEACH, FL 33444
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WILLIAMS, DALE 9019 CLASSIC CT. ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Donald A. Deluzio Donald A. Deluzio 4/22/04 407-521-6655
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #